| Case 16-14817 Doc 1 Fill in this information to identify your case: | Filed 04/30/16  | Entered 04/30/16 00:05:10<br>age 1 of 70 | Desc Main                          |
|---|---|--|------------------------------------|
| United States Bankruptcy Court for the:                             |   |  |                                    |
| Northern District of: Illinois (State)                              |   |  |                                    |
| Case number (if known)  | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 |  | Check if this is an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself   |                            |   |
|---|----------------------------|---|
|   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name  Write the name that is on                                 | Jessica<br>First name      | First name                                    |
| your government-issued picture identification (for example, your driver's | Middle name King           | Middle name                                   |
| license or passport   | Last name                  | Last name                                     |
| Bring your picture identification to your meeting with the trustee.       | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All other names you  |                            |   |
| have used in the last   | First name                 | First name                                    |
| 8 years   | Middle                     | Middle page                                   |
| Include your married or   | Middle name                | Middle name                                   |
| maiden names.   | Last name                  | Last name                                     |
|   | First name                 | First name                                    |
|   | Middle name                | Middle name                                   |
|   | Last name                  | Last name                                     |
| 3. Only the last 4 digits of your Social                                  | XXX - XX- 4183             | xxx - xx-                                     |
| Security number or  | OR                         | OR  |
| federal Individual<br>Taxpayer<br>Identification<br>number (ITIN)         | 9 xx - xx-                 | 9 xx - xx-                                    |

Jessica Case 16-14817 Doc 1 Filed 04/39/16 Entered 04/30/16/00:05:10 Desc Main Debtor 1 Page 2 of 70 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 1924 S 10th Ave Number Street Number Street 60153 Maywood Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Jessic Case 16-14817 Doc 1 Filed 04/39/16 Entered 04/30/16 (00:05:10 Desc Main

Document Document Page 3 of 70 Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ₩ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

JessicaCase 16-14817 Doc 1 Filed 04/39/16 Entered 04/30/16/00:05:10 Desc Main Debtor 1 Page 4 of 70 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building

that needs urgent

repairs?

State

City

Zip Code

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Explain Your Efforts to Receive a Briefing About Credit Counseling

## 15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1:                                |  | Ab | About Debtor 2 (Spouse Only in a Joint Case):   |   |  |  |  |
|--|--|----|---|---|--|--|--|
| You must check one:                            |  | Yo | u must check one:   |   |  |  |  |
| counseling agend                               | ing from an approved credit<br>cy within the 180 days before I filed this<br>on, and I received a certificate of   |    | I received a briefing from an approved credit counseling agency within the 180 days before I fit bankruptcy petition, and I received a certificate completion.  |   |  |  |  |
| Attach a copy of the that you developed        | e certificate and the payment plan, if any, with the agency.   |    | Attach a copy of the that you developed   | e certificate and the payment plan, if any, with the agency.  |  |  |  |
| counseling agend                               | ing from an approved credit<br>by within the 180 days before I filed this<br>on, but I do not have a certificate of  |    | counseling agen   | ing from an approved credit<br>cy within the 180 days before I filed this<br>ion, but I do not have a certificate of  |  |  |  |
| -  | r you file this bankruptcy petition,<br>py of the certificate and payment  |    | •   | er you file this bankruptcy petition,<br>opy of the certificate and payment   |  |  |  |
| an approved agei                               | ed for credit counseling services from<br>ncy, but was unable to obtain those<br>ne 7 days after I made my request, and<br>unces merit a 30-day temporary waiver<br>nt.          |    | an approved age<br>services during t  | ted for credit counseling services from<br>ncy, but was unable to obtain those<br>he 7 days after I made my request, and<br>ances merit a 30-day temporary waiver<br>ent.     |  |  |  |
| attach a separate si<br>obtain the briefing, v | temporary waiver of the requirement,<br>heet explaining what efforts you made to<br>why you were unable to obtain it before you<br>and what exigent circumstances required       |    | attach a separate sobtain the briefing,   | the temporary waiver of the requirement, sheet explaining what efforts you made to why you were unable to obtain it before you to and what exigent circumstances required to. |  |  |  |
| -  | dismissed if the court is dissatisfied with of receiving a briefing before you filed for   |    | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.   |   |  |  |  |
| receive a briefing w<br>certificate from the   | ied with your reasons, you must still vithin 30 days after you file. You must file a approved agency, along with a copy of the eveloped, if any. If you do not do so, your ssed. |    | If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. |   |  |  |  |
| -  | e 30-day deadline is granted only for cause naximum of 15 days.  |    | •   | ne 30-day deadline is granted only for cause<br>naximum of 15 days.   |  |  |  |
| I am not required counseling becau             | to receive a briefing about credit use of:   |    | I am not required counseling beca   | to receive a briefing about credit use of:  |  |  |  |
| Incapacity.                                    | I have a mental illness or a mental<br>deficiency that makes me incapable of<br>realizing or making rational decisions<br>about finances.  |    | Incapacity.   | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |  |  |  |
| Disability.                                    | My physical disability causes me to be unable to participate in a briefing in  |    | Disability.   | My physical disability causes me to be unable to participate in a briefing in   |  |  |  |

## Official Form 101

person, by phone, or through the

military combat zone. If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

Active duty.

counseling with the court.

internet, even after I reasonably tried to

I am currently on active military duty in a

person, by phone, or through the

military combat zone.

If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

Active duty.

counseling with the court.

internet, even after I reasonably tried to

I am currently on active military duty in a

JessicaCase 16-14817 Doc 1 Debtor 1 Page 6 of 70 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Jessica King Signature of Debtor 2 Signature of Debtor 1 4/30/2016 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Jessic Case 16-14817 Doc 1 Filed 04/30/16 Entered 04/30/16/00:05:10 Desc Main

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Angie Harb                   |          | Date | 4/30/2016     |                     |
|----------------------------------|----------|------|---------------|---------------------|
| Signature of Attorney for Debtor |          |      | MM / DD / YY  | YY                  |
| Angie Harb                       |          |      |               |                     |
| Printed name                     |          |      |               |                     |
| Semrad Law Firm                  |          |      |               |                     |
| Firm name                        |          |      |               |                     |
| 11101 S. Western Avenue          |          |      |               |                     |
| Street                           |          |      |               |                     |
|                                  |          |      |               |                     |
| Chicago                          | Illinois |      |               | 60643               |
| City                             | State    |      |               | Zip Code            |
| Contact phone                    |          | 1    | Email address | aharb@semradlaw.com |
|                                  |          |      |               |                     |
| Bar number                       |          |      | State         |                     |

Doc 1 Filed 04/30/16 Entered 04/30/16 00:05:10 Desc Main Fill in this information to identify your case: Debtor 1 Jessica King Last Name First Name Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$13,355.00 1b. Copy line 62, Total personal property, from Schedule A/B ...... \$13,355.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$24,138.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$47.710.95 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$71,848.95 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$2.690.39 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$2,490.00

Debtor 1 Jessic Case 16-14817 Doc 1 Filed 04/39/16 Entered 04/30/16 (00/05:10 Desc Main

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| Par  | 4: Answer These Questions for Administrative and Statistical Records   |                            |            |  |  |  |  |  |
|--|--|----------------------------|------------|--|--|--|--|--|
| 6. <i>A</i>  | Are you filing for bankruptcy under Chapters 7, 11, or 13?   |                            |            |  |  |  |  |  |
|  | No. You have nothing to report on this part of the form. Check this box and submit this form to the court  | with your other schedules. |            |  |  |  |  |  |
|  | Yes.   |                            |            |  |  |  |  |  |
| 7. <b>\</b>  | What kind of debt do you have?   |                            |            |  |  |  |  |  |
|  | Your debts are primarily consumer debts. Consumer debts are those incurred by an individual prim family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. | •                          |            |  |  |  |  |  |
|  | Your debts are not primarily consumer debts. You have nothing to report on this part of the form. C this form to the court with your other schedules.  | heck this box and submit   |            |  |  |  |  |  |
| 8.   | From the Statement of Your Current Monthly Income: Copy your total current monthly income from C Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.                                      | Official                   | \$3,277.17 |  |  |  |  |  |
| 9.   | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:   |                            |            |  |  |  |  |  |
|  | From Part 4 on Schedule E/F, copy the following:   | Total claim                |            |  |  |  |  |  |
|  | 9a. Domestic support obligations (Copy line 6a.)   | \$0.00                     |            |  |  |  |  |  |
|  | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$0.00                     |            |  |  |  |  |  |
|  | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$0.00                     |            |  |  |  |  |  |
|  | 9d. Student loans. (Copy line 6f.) \$27,770.00   |                            |            |  |  |  |  |  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) |  |                            |            |  |  |  |  |  |
|  | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | \$0.00                     |            |  |  |  |  |  |
|  | 9g. <b>Total.</b> Add lines 9a through 9f.   | \$27,770.00                |            |  |  |  |  |  |

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|--|---|---|---|--|---|---|
| Fill in this                               | information to identify your case   | t e   |   | <u> </u>   |   |   |
| Debtor 1                                   | Jessica   |   | King  |  |   |   |
|  | First Name  | Middle  | Name Last N   | lame   |   |   |
| Debtor 2                                   |   |   |   |  |   |   |
| (Spouse,                                   | if filing) First Name   | Middle  | Name Last N   | lame   |   |   |
| United St                                  | ates Bankruptcy Court for the:  | Northern  | District of II  |  |   |   |
| Case nun                                   | nber  |   | (\$   | State)   |   |   |
| (If known)                                 |   |   |   |  |   | _   |
| Officia                                    | al Form 106A/B  |   |   |  |   | Check if this is an<br>amended filing                           |
| Sche                                       | dule A/B: Prope   | rty   |   |  |   | 12/1  |
| ategory vesponsib<br>rrite your<br>Part 1: | ategory, separately list and des<br>where you think it fits best. Be<br>ble for supplying correct infor<br>name and case number (if kn<br>Describe Each Residen<br>u own or have any legal or equ | e as complete an<br>mation. If more s<br>own). Answer ev<br>ce, Building, | d accurate as possible. I<br>space is needed, attach<br>ery question.<br>Land, or Other Rea | If two married people are filin<br>a separate sheet to this form<br>I Estate You Own or Ha | g together, both are<br>. On the top of any a | equally<br>idditional pages,                                    |
| <b>✓</b>                                   | No. Go to Part 2  |   |   |  |   |   |
|  | Yes. Where is the property?   |   |   |  |   |   |
| 4.4  |   |   | What is the property  |  |   | ed claims or exemptions. Put cured claims on <i>Schedule D:</i> |
| 1.1  | Street address, if available, or  | other description   | Single-family home  |  |   | Claims Secured by Property.                                     |
|  |   | •   | Duplex or multi-uni   | · ·  | Current value of th                           | e Current value of the  |
|  |   |   | Condominium or co   | •  | entire property?                              | portion you own?  |
|  |   |   | Land  | Jolle Home   |   | <del></del>   |
|  | Number Street   |   | Investment property   | ı  | Describe the nature                           | of your ownership   |
|  |   |   | Timeshare   |  | interest (such as fee                         | e simple, tenancy by  |
|  | City State  | Zip Code  | Other   |  | the entireties, or a i                        | ife estate), if known.  |
|  |   |   | <u> </u>  |  |   |   |
|  |   |   |   | in the property? Check one.  | Check if this is (see instruction             | community property  |
|  |   |   | Debtor 1 only   |  |   | ,   |
|  |   |   | Debtor 2 only   | 0 b  |   |   |
|  |   |   | Debtor 1 and Debto  | •  |   |   |
|  |   |   | _   | debtors and another  u wish to add about this item   | ı, such as local                              |   |
| If you                                     | own or have more than one, list h   | ere:  | property identification   |  |   |   |
| ,  | ,   |   | What is the property  | ? Check all that apply.  | Do not deduct secure                          | ed claims or exemptions. Put                                    |
| 1.2  | <u> </u>  | 4 1 1 2   | Single-family home  | <del>)</del>   |   | cured claims on Schedule D:<br>Claims Secured by Property.      |
|  | Street address, if available, or  | other description   | Duplex or multi-uni   | t building   | Creditors Who have                            | Claims Secured by Property.                                     |
|  |   |   | _ Condominium or co   | operative  | Current value of th                           |   |
|  |   |   | Manufactured or m   | obile home   | entire property?                              | portion you own?  |
|  |   |   | Land  |  |   |   |
|  | Number Street   |   | Investment property   | <i>!</i>   | Describe the nature                           | e of your ownership<br>e simple, tenancy by                     |
|  |   |   | Timeshare<br>Other  |  |   | ife estate), if known.  |
|  | City State  | Zip Code  |   |  | -   |   |
|  |   |   | Who has an interest   | in the property? Check one.  | Check if this is                              | community property  |
|  |   |   | Debtor 1 only   | and property i emean and   | (see instruction                              |   |
|  |   |   | Debtor 2 only   |  |   |   |
|  |   |   | Debtor 1 and Debtor   | or 2 only  |   |   |
|  |   |   | At least one of the o   | •  |   |   |
|  |   |   | _   | u wish to add about this item  | ı. such as local                              |   |
|  |   |   | property identification   | n number:  | ., 10041                                      |   |

| Debtor 1 | JessicaCase 16-148   |                          | Filed 04/30/16 Entered 04/30/16  | 000:05: <u>10 De</u>   | sc Main   |
|----------|--|--------------------------|--|--|---|
| 1.3      | eet address, if available, or o                            | [                        | Documerite Page 11 of 70  What is the property? Check all that apply.  Single-family home  | the amount of any secu   | claims or exemptions. Put red claims on <i>Schedule D:</i>                                    |
|          | eet address, ii avallable, of d                            | uner description [       | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home   | Current value of the entire property?                                  | , ,   |
| Nur      | mber Street / State  | Zip Code                 | Land Investment property Timeshare Other   | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by  |
|          |  | ]<br>]<br>]              | Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, s | (see instructions  | ommunity property   |
| 2. Add   | the dollar value of the po                                 | p                        | oroperty identification number:  of your entries from Part 1, including any entries for  |  |   |
|          |  |                          |  |  |   |
| Do you o |  | equitable interest in    | any vehicles, whether they are registered or not? In   |  |   |
|          | ans, trucks, tractors, sport uti                           |                          | report it on Schedule G: Executory Contracts and Unexples  | ored Leases.   |   |
|          | Make<br>Model:<br>Year:                                    | Chevy<br>Equinox<br>2012 | Who has an interest in the property? Check one.  Debtor 1 only   | the amount of any secu   | claims or exemptions. Put<br>ired claims on <i>Schedule D:</i><br>Claims Secured by Property. |
|          | Approximate mileage: Other information: 2012 Chevy Equinox | 75000                    | Debtor 2 only Debtor 1 and Debtor 2 only   | Current value of the entire property? \$11700.00                       | Current value of the portion you own?<br>\$11700.00   |
|          |  |                          | At least one of the debtors and another  |  | <u>**********</u>   |
|          | , ,  |                          | At least one of the debtors and another  Check if this is community property (see instructions)  |  | <u> </u>  |
| 3.2      | Model:<br>Year:  |                          | Check if this is community property (see   | the amount of any secu   | claims or exemptions. Put<br>ared claims on <i>Schedule D:</i><br>Claims Secured by Property. |
| 3.2      | Model:   |                          | Check if this is community property (see instructions)  Who has an interest in the property? Check one.  | the amount of any secu   | claims or exemptions. Put<br>ired claims on Schedule D:<br>Claims Secured by Property.        |

| Debtor 1 | JessicaCase 16-14817 Doc 1                      | Filed 04/30/16 Entered 04/30/14   | 6/00:05: <u>10 Des</u>    | c Main                     |  |
|----------|---|---|---------------------------|----------------------------|--|
|          | First Name Middle Name                          | Document Page 12 of 70  |                           |                            |  |
| 3.3      | Make  | Who has an interest in the property? Check  | Do not deduct secured cla |                            |  |
|          | Model:  | one.  | the amount of any secure  | ims Secured by Property.   |  |
|          | Approximate mileage:                            | Debtor 1 only   | Orealions who have old    | iins occured by 1 toporty. |  |
|          |   | Debtor 2 only   | Current value of the      | Current value of the       |  |
|          | Other information:                              | Debtor 1 and Debtor 2 only  | entire property?          | portion you own?           |  |
|          |   | At least one of the debtors and another   |                           |                            |  |
|          |   | Check if this is community property (see instructions)                            |                           |                            |  |
| 3.4      |   | Who has an interest in the property? Check  | Do not deduct secured cla | •                          |  |
|          | Model:  | one.  | the amount of any secure  | ims Secured by Property.   |  |
|          | Approximate mileage:                            | _ =   | Creditors Wild Have Cla   | ins secured by Property.   |  |
|          |   | Debtor 2 only   | Current value of the      | Current value of the       |  |
|          | Other information:                              | Debtor 1 and Debtor 2 only  | entire property?          | portion you own?           |  |
|          |   | At least one of the debtors and another   |                           |                            |  |
|          |   | Check if this is community property (see instructions)                            |                           |                            |  |
| <b>└</b> | Yes<br>Make                                     | Who has an interest in the property? Check  | Do not deduct secured of  | aims or exemptions. Put    |  |
| 4.1      | Make  | Who has an interest in the property? Check  | Do not deduct secured cl  | aims or exemptions. Put    |  |
|          | Model:  | one.  | the amount of any secure  |                            |  |
|          | Year:   | Debtor 1 only   | Creditors Who Have Cla    | ims Secured by Property.   |  |
|          | Approximate mileage:                            | Debtor 2 only   | Current value of the      | Current value of the       |  |
|          | Other information:                              | Debtor 1 and Debtor 2 only  | entire property?          | portion you own?           |  |
|          |   | At least one of the debtors and another   |                           |                            |  |
|          |   | Check if this is community property (see instructions)                            |                           |                            |  |
| 4.2      | Make  | Who has an interest in the property? Check  | Do not deduct secured cl  | •                          |  |
|          | Model:  | one.  | the amount of any secure  |                            |  |
|          | Year: Approximate mileage:                      | Debtor 1 only   | Creditors Write Have Cla  | ims Secured by Property.   |  |
|          | Approximate mileage.                            | Debtor 2 only   | Current value of the      | O                          |  |
|          |   |   | entire property?          | Current value of the       |  |
|          | Other information:                              | Debtor 1 and Debtor 2 only  | ontino proporty :         | portion you own?           |  |
|          | Other information:                              | At least one of the debtors and another   |                           |                            |  |
|          | Other information:                              |   |                           |                            |  |
|          | I the dollar value of the portion you own for a | At least one of the debtors and another  Check if this is community property (see | for pages                 |                            |  |

Debtor 1 Jessic Case 16-14817 Doc 1 Filed 04k30/16 Entered 04/30/16 00:05:10 Desc Main First Name Document Page 13 of 70

**Describe Your Personal and Household Items** 

| D                       | o you own or ha  | ve any legal or equitable interest in any of the following items?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|-------------------------|--|---|---|
| 6                       | . Household goods  | and furnishings   |   |
|                         |  | iances, furniture, linens, china, kitchenware   |   |
|                         | No   |   |   |
| <b>✓</b>                | Yes. Describe  | misc. furniture   | <b>C</b> 450.00   |
|                         |  |   | \$450.00  |
|                         | . Electronics<br>Examples: Televisions                   | and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music   |   |
| ✓                       | No   |   |   |
|                         | Yes. Describe  |   |   |
|                         | O alla adil la a ada ada                                 |   |   |
|                         |  | nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; n, or baseball card collections; other collections, memorabilia, collectibles |   |
| ✓                       | No   |   |   |
|                         | Yes. Describe  |   |   |
|                         |  | orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments               |   |
| $\overline{\mathbf{V}}$ | No   |   |   |
|                         | Yes. Describe  |   |   |
|                         | O. Firearms  Examples: Pistols, rifle  No  Yes. Describe | es, shotguns, ammunition, and related equipment   |   |
| ٢                       | res. Describe  |   |   |
|                         | <b>1. Clothes</b><br>Examples: Everyday o                | clothes, furs, leather coats, designer wear, shoes, accessories   |   |
| <u> </u>                | Yes. Describe  | misc. clothing  | \$650.00  |
|                         |  |   | φοσο.σο   |
|                         | 2. Jewelry<br>Examples: Everyday je<br>gold, silve<br>No | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,<br>r   |   |
| 片                       |  |   |   |
| ⊻                       | Yes. Describe  | misc. jewelry   | \$75.00   |
|                         | 3. Non-farm animals<br>Examples: Dogs, cats              |   |   |
| <b>✓</b>                | No   |   |   |
|                         | Yes. Describe  |   |   |
| 1                       | 4. Any other person                                      | al and household items you did not already list, including any health aids you did not list   |   |
|                         | No   |   |   |
|                         | Yes. Describe  |   |   |
|                         |  | ue of all of your entries from Part 3, including any entries for pages you have attached  | \$1175.00   |
| f                       | or Part 3. Write that i                                  | number here   | · · · · · · · · · · · · · · · · · · ·   |

Debtor 1 Jessic Case 16-14817 Doc 1 Filed 04/30/16 Entered 04/30/16 (00:05:10 Desc Main

Document Page 14 of 70 **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes ..... \$15.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: \$400.00 chase 17.2. Checking account: 17.3. Savings account: chase 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: **✓** Yes 1 share of stock Sirius Radio \$5.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

% of ownership:

**✓** No

them

Yes. Give specific information about

Name of entity

| Deb | tor 1        | JessicaCase 16                                     | <u>-14817</u>  | Doc 1            | Filed 04/30/16  | Entered 04/€             | 30/16/00:05: <u>10</u> | Desc Main      |
|-----|--------------|--|----------------|------------------|---|--------------------------|------------------------|----------------|
|     |              | First Name   |                | Middle Name      | Document Menter   | Page 15 of 70            | )                      |                |
| 20. | Neg          | otiable instruments in                             | clude persona  | al checks, cas   | gotiable and non-negot<br>hiers' checks, promissory r<br>nsfer to someone by signir | notes, and money order   | rs.                    |                |
|     | <b>✓</b>     | No   |                |                  |   |                          |                        |                |
|     |              | Yes. Give specific information about them          | Issuer name    | :                |   |                          |                        |                |
|     |              |  |                |                  |   |                          |                        |                |
|     |              |  |                |                  |   |                          |                        | _              |
| 04  | D-4:         |  |                |                  |   |                          |                        | <del>-</del> - |
| ۷۱. | Exar         | rement or pension<br>mples: Interests in IRA<br>No |                | eogh, 401(k), 4  | 103(b), thrift savings accoun   | nts, or other pension or | profit-sharing plans   |                |
|     |              | Yes. List each                                     | Type of acco   | ount:            | Institution name:   |                          |                        |                |
|     |              | account separately.                                | 401(k) or sin  | nilar plan:      |   |                          |                        |                |
|     |              |  | Pension plar   | n:               |   |                          |                        |                |
|     |              |  | IRA:           |                  |   |                          |                        | _              |
|     |              |  | Retirement a   | account:         |   |                          |                        |                |
|     |              |  | Keogh:         |                  |   |                          |                        |                |
|     |              |  | Additional ad  | ccount:          |   |                          |                        |                |
|     |              |  | Additional ad  | ccount:          |   |                          |                        | _              |
| 22. | Seci         | urity deposits and p                               |                |                  |   |                          |                        | _              |
|     | Your<br>Exar | share of all unused d                              | eposits you ha | ave made so th   | nat you may continue servic<br>public utilities (electric, gas                      |                          |                        |                |
|     |              | No .   |                |                  |   |                          |                        |                |
|     |              | Yes  |                |                  | Institution name:   |                          |                        |                |
|     |              |  | Electric:      |                  |   |                          |                        |                |
|     |              |  | Gas:           |                  |   |                          |                        | _              |
|     |              |  | Heating oil:   |                  |   |                          |                        | _              |
|     |              |  | Security dep   | osit on rental o | unit:   |                          |                        | _              |
|     |              |  | Prepaid rent   | t:               |   |                          |                        |                |
|     |              |  | Telephone:     |                  |   |                          |                        |                |
|     |              |  | Water:         |                  |   |                          |                        |                |
|     |              |  | Rented furni   | iture:           |   |                          |                        |                |
|     |              |  | Other:         |                  |   |                          |                        | _              |
| 23. | Ann          | uities (A contract for                             | a periodic pa  | yment of mone    | ey to you, either for life or fo  | r a number of years)     |                        | _              |
|     | <b>✓</b>     | No   |                |                  |   |                          |                        |                |
|     |              | Yes  | Issuer name    | and description  | on:   |                          |                        |                |
|     |              |  |                |                  |   |                          |                        | _              |
|     |              |  |                |                  |   |                          |                        | <u> </u>       |
|     |              |  |                |                  |   |                          |                        |                |

| Debte | or 1       | Jessica (First Name                           | ase     | <u> 16-2</u> | 14817                | Doc 1                              |               | 04/30/16<br>cumethtme |           |                   |            | 00:05: <u>10</u>  | De            | esc Main  |
|-------|------------|---|---------|--------------|----------------------|------------------------------------|---------------|-----------------------|-----------|-------------------|------------|-------------------|---------------|---|
| 24.   |            |   |         |              |                      | n account in<br>1 529(b)(1).       | a qualifie    | d ABLE progra         | m, or u   | nder a qualifie   | ed state t | uition program    | •             |   |
|       |            | No<br>Yes                                     | Institu | ution n      | ame and d            | lescription. Sep                   | parately file | the records of a      | ny inter  | ests.11 U.S.C. §  | § 521(c):  |                   |               |   |
| 25.   | exe        | sts, equita<br>rcisable fo<br>No<br>Yes. Desc | or you  | r bene       |                      | ts in property                     | (other the    | an anything lis       | ted in li | ne 1), and righ   | nts or po  | wers              |               |   |
| 26.   |            | ents, copy                                    | rights  | s, trad      |                      |                                    |               | intellectual pro      |           |                   |            |                   |               |   |
|       | _          | No<br>Yes. Desc                               |         |              | names, we            | ebsites, procee                    | as from ro    | yalties and licens    | sing agr  | eements           |            |                   |               |   |
| 27.   |            |   |         |              |                      | eneral intangil<br>e licenses, coo |               | ssociation holdin     | gs, liqu  | or licenses, prof | fessional  | licenses          |               |   |
|       |            | No<br>Yes. Desc                               | ribe    |              |                      |                                    |               |                       |           |                   |            |                   |               |   |
| Mon   | ey (       | or prope                                      | erty c  | owed         | l to you'            | ?                                  |               |                       |           |                   |            |                   | <b>p</b><br>D | current value of the ortion you own? o not deduct secured aims or exemptions. |
| 28.   | Тах і      | refunds ov                                    | wed to  | you          |                      |                                    |               |                       |           |                   |            |                   |               |   |
|       | <u> </u>   |   |         |              |                      |                                    |               |                       |           |                   |            | ·                 |               |   |
|       | Π,         | Yes. Give s<br>about                          |         |              | mation<br>ding wheth | er                                 |               |                       |           |                   |            | ederal:           |               |   |
|       |            | you a   | Iready  | filed t      | he returns           |                                    |               |                       |           |                   | S          | State:            |               |   |
| 20    | Fam        | ily suppor                                    |         | y our o.     |                      |                                    |               |                       |           |                   | L          | ocal:             |               |   |
|       |            |   |         | r lump       | sum alimo            | ony, spousal su                    | oport, child  | support, mainte       | nance, d  | livorce settleme  | ent, prope | erty settlement   |               |   |
|       | <b>✓</b> I | No  |         |              |                      |                                    |               |                       |           |                   |            |                   |               |   |
|       |            | Yes. Give s                                   | pecific | c inforr     | mation               |                                    |               |                       |           |                   | A          | llimony:          |               |   |
|       |            |   |         |              |                      |                                    |               |                       |           |                   | I N        | Maintenance:      |               |   |
|       |            |   |         |              |                      |                                    |               |                       |           |                   | S          | Support:          |               |   |
|       |            |   |         |              |                      |                                    |               |                       |           |                   | D          | Divorce settlemen | t:            |   |
|       |            |   |         |              |                      |                                    |               |                       |           |                   | P          | roperty settlemer | nt:           |   |
|       |            | er amounts<br>nples: Unpa                     |         |              |                      |                                    | nts, disabil  | ity benefits, sick    | pay, vac  | ation pay, worke  | ers' comp  | ensation,         |               |   |
|       |            |   |         | -            | -                    | paid loans you                     |               | -                     | -         |                   | ·          |                   |               |   |
|       | _          | No  |         | _            |                      |                                    |               |                       |           |                   |            |                   |               |   |
|       | Ш,         | Yes. Descr                                    | ibe     |              |                      |                                    |               |                       |           |                   |            |                   |               |   |

| Debt | tor 1      | JessicaCase 16 First Name                           | 6-14817          | Doc 1<br>Middle Name | Filed 04/39/16<br>Document                               | <u>Entered</u> 04/30/ର୍ମ<br>Page 17 of 70 | <b>L6</b> (00:05: <u>10</u>  | esc Main   |
|------|------------|---|------------------|----------------------|--|---|------------------------------|--|
| 31.  |            | rests in insurance  <br>mples: Health, disabi       |                  | rance; health        |  | edit, homeowner's, or renter              | r's insurance                |  |
|      |            | No<br>Yes. Name the insur<br>of each policy and lis |                  | -<br>-               | Company name:  |   | Beneficiary:                 | Surrender or refund value:   |
| 32.  | If you     |   | of a living trus |                      | neone who has died<br>eeds from a life insurance p       | policy, or are currently entitle          | d to receive                 |  |
| 33.  | Exar<br>✓  |   |                  |                      | have filed a lawsuit or m<br>ce claims, or rights to sue | ade a demand for paymer                   | nt                           |  |
| 34.  | Othe to se |   | unliquidated     | claims of ev         | ery nature, including co                                 | unterclaims of the debtor                 | and rights                   |  |
| 35.  | <b>✓</b>   | financial assets yo No Yes. Describe                | u did not alre   | ady list             |  |   |                              |  |
| 36.  |            |   | -                |                      |  | es for pages you have att                 |                              | \$480.00   |
| Part | 5:         | Describe Any B                                      | usiness-R        | elated Pro           | perty You Own or Ha                                      | ave an Interest In. Lis                   | st any real estate ir        | n Part 1.  |
| 37.  | Do y       | ou own or have an                                   | y legal or equ   | uitable intere       | st in any business-relate                                | d property?                               |                              |  |
|      |            | No. Go to Part 6.<br>Yes. Go to line 38.            |                  |                      |  |   |                              | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38.  | <b>✓</b>   | ounts receivable or<br>No<br>Yes. Describe          | commissions      | s you alread         | y earned   |   |                              |  |
| 39.  |            | ce equipment, furn<br>nples: Business-rela          |                  |                      | odems, printers, copiers, fa                             | x machines, rugs, telephone               | es, desks, chairs, electroni | c devices  |
|      |            | No<br>Yes. Describe                                 |                  |                      |  |   |                              |  |

| Deb          |   | <u>5-14817 DOC 1</u>                                 |  |                                    | <u>esc main</u>   |
|--------------|---|--|--|------------------------------------|---|
| 40.          | First Name  Machinery, fixtures, equ                  | Middle Name<br>uipment, supplies you u               | Docum <sup>e</sup> tnt <sup>me</sup> Pao<br>se in business, and tools of you | ge 18 of 70<br>rtrade              |   |
|              | <b>✓</b> No   |  |  |                                    |   |
|              | Yes. Describe   |  |  |                                    |   |
| 41.          | Inventory   |  |  |                                    |   |
|              | <b>✓</b> No   |  |  |                                    |   |
|              | Yes. Describe   |  |  |                                    |   |
| 42.          | Interests in partnershi                               | ps or joint ventures                                 |  |                                    |   |
|              | ✓ No  |  | Name of entity:  | % of ownership:                    |   |
|              | Yes. Give specific information about them             |  | Traine of entity.  | 78 OI OWNERSHIP.                   |   |
| 12 <b>(</b>  | Pustomar lists, mailing                               | lists, or other compilation                          |  |                                    |   |
| 43. <b>(</b> |   | iists, or other compliant                            | JIIS   |                                    |   |
|              | No  | -l d   | - information (so defined in 44.11.0   | 0.5404/4440)                       |   |
|              |   | ciude personally identifiabl                         | e information (as defined in 11 U.S.   | C. § 101(41A))?                    |   |
|              | ☐ No  |  |  |                                    |   |
|              | Yes. Descri   | ibe  |  |                                    |   |
| 44.          | Any business-related p                                | roperty you did not alrea                            | ady list   |                                    |   |
|              | <b>✓</b> No   |  |  |                                    |   |
|              | Yes. Give specific                                    |  |  |                                    |   |
|              | information   |  |  |                                    | <del></del>   |
|              |   |  |  |                                    |   |
|              |   |  |  |                                    |   |
|              |   |  |  |                                    |   |
|              |   |  |  |                                    |   |
|              |   |  |  |                                    |   |
|              | dd the dollar value of al<br>art 5. Write that number | to a suit  | art 5, including any entries for pa  | ges you have attached              |   |
| Part         |   | farm- and Commerc<br>interest in farmland, list it i |  | rty You Own or Have an Interest In |   |
| 46.          | Do you own or have a                                  | ny legal or equitable inte                           | erest in any farm- or commercial   | fishing-related property?          |   |
|              | No. Go to Part 7. Yes. Go to line 47.                 |  |  |                                    | Current value of the portion you own?  Do not deduct secured claims |
| 47.          | Farm animals Examples: Livestock, pou                 | ultry, farm-raised fish                              |  |                                    | or exemptions   |
|              | No No   | ,, .aa   |  |                                    |   |
|              | Yes. Describe   |  |  |                                    |   |

| Deb          | tor 1 JessicaCase 1 First Name                      | .6-14817          | Doc 1<br>Middle Name | Filed 04k39/1 Document |              | <u>red</u>                | Desc M | ain          |
|--------------|---|-------------------|----------------------|------------------------|--------------|---------------------------|--------|--------------|
| 48.          | Crops-either growing                                | g or harvested    |                      |                        | 9-           |                           |        |              |
|              | <b>✓</b> No   |                   |                      |                        |              |                           |        |              |
|              | Yes. Describe                                       |                   |                      |                        |              |                           |        |              |
| 49.          | Farm and fishing equ                                | uipment, imple    | ments, machi         | nery, fixtures, and to | ols of trade |                           |        |              |
|              | <b>✓</b> No   |                   |                      |                        |              |                           |        |              |
|              | Yes. Describe                                       |                   |                      |                        |              |                           |        |              |
| 50.          | Farm and fishing sup                                | plies, chemica    | als, and feed        |                        |              |                           |        |              |
|              | <b>✓</b> No   |                   |                      |                        |              |                           |        |              |
|              | Yes. Describe                                       |                   |                      |                        |              |                           |        |              |
| 51.          | Any farm- and comm                                  | ercial fishing-r  | elated proper        | ty you did not alread  | y list       |                           |        |              |
|              | <b>✓</b> No   |                   |                      |                        |              |                           |        |              |
|              | Yes. Describe                                       |                   |                      |                        |              |                           |        |              |
|              |   |                   |                      |                        |              |                           |        |              |
|              | dd the dollar value of a<br>art 6. Write that numbe |                   |                      |                        |              |                           |        |              |
| 101 1        | art o. write trial numbe                            |                   |                      |                        |              |                           |        |              |
|              |   |                   |                      |                        |              |                           |        |              |
| Part         | 7: Describe All P                                   | roperty You       | Own or Ha            | ve an Interest in      | That You     | Did Not List Above        |        |              |
| 53.          | Do you have other pro                               |                   |                      | ot already list?       |              |                           |        |              |
|              | Examples: Season ticke                              | ets, country club | membership           |                        |              |                           |        |              |
|              | ✓ No  |                   |                      |                        |              |                           |        |              |
|              | Yes. Give specific information                      |                   |                      |                        |              |                           |        |              |
|              |   |                   |                      |                        |              |                           |        |              |
|              |   |                   |                      |                        |              |                           |        |              |
| 54. A        | dd the dollar value of a                            | all of your entr  | ies from Part        | 7. Write that number   | here         |                           | .▶ -   |              |
|              |   |                   |                      |                        |              |                           |        |              |
|              |   |                   |                      |                        |              |                           |        |              |
| Part         | 8: List the Totals                                  | of Each Pa        | rt of this F         | orm                    |              |                           | ,      |              |
| 55. <b>I</b> | Part 1: Total real estate                           | , line 2          |                      |                        |              | <b>&gt;</b>               |        |              |
| 56.          | part 2 total vehicles, lin                          | ne 5              |                      | \$1170                 | 0.00         |                           |        |              |
| 57. <b>P</b> | Part 3: Total personal a                            | nd household      | items, line 15       |                        |              |                           |        |              |
| 58. <b>P</b> | Part 4: Total financial as                          | ssets, line 36    |                      | \$480.                 |              | <del>_</del>              |        |              |
| 59. <b>I</b> | Part 5: Total business-                             | related proper    | ty, line 45          |                        |              |                           |        |              |
| 60. <b>i</b> | Part 6: Total farm- and                             | fishing-related   | d property, lin      | e 52                   |              | <u>—</u>                  |        |              |
| 61. <b>I</b> | Part 7: Total other prop                            | erty not listed   | I, line 54           |                        |              | <u> </u>                  |        |              |
| 62.          | Total personal property                             | y. Add lines 56 t | hrough 61            |                        | 55.00        |                           |        | + \$13355.00 |
|              |   |                   |                      | φισσ                   |              | Copy personal property to | otal ▶ | . \$10000.00 |
|              |   |                   |                      |                        |              |                           |        | \$13355.00   |
| 63. <b>T</b> | otal of all property on                             | Schedule A/B.     | Add line 55 + l      | ine 62                 |              |                           |        |              |

| Filli  | in this inform:   | Case 16-14817 ation to identify your case:   | Doc 1 Filed (   | 04/30/16 Entered 04  | /30/16 00:05:10  | Desc Main   |
|--|---|--|---|--|--|---|
|  | otor 1  | Jessica  | M. III. M.  | King   |  |   |
|  | otor 2<br>ouse, if filing)  | First Name   | Middle Name  Middle Name  | Last Name  Last Name   |  |   |
| Unit   | ted States Ba   | nkruptcy Court for the:  | Northern  | District of Illinois (State)   |  |   |
|  | se number<br>nown)  |  |   | (State)  |  |   |
| Of   | ficial F  | orm 106C   |   |  | <del>_</del>   | Check if this is a amended filing   |
| Sc   | hedule  | C: The Prop  | erty You Clai   | m as Exempt  |  | 12/1  |
| the for is to exercise exercise exercise properties to the following terms of the following | each item o state a s mpted up eive certa mption of perty is de t1: Ident Which set | additional pages, writh of property you class pecific dollar amount to the amount of an in benefits, and taxion 100% of fair market etermined to exceed ify the Property You | im as exempt, you at as exempt. Altern y applicable statute exempt retirement if value under a law that amount, your Claim as Exempt aiming? Check one only, nonbankruptcy exemptions | must specify the amount of atively, you may claim the bry limit. Some exemption funds—may be unlimited in that limits the exemption would be limited even if your spouse is filing with your spouse is fill your spouse is fill your spouse is the your spouse is fill your spouse is the your spouse is the your spouse is the your spouse is the your s | of the exemption you<br>full fair market value<br>s—such as those fo<br>n dollar amount. Ho<br>o a particular dollar<br>ed to the applicable s | r health aids, rights to<br>wever, if you claim an<br>amount and the value of the |
| 2.   | For any pro   | operty you list on Schedu  | lle A/B that you claim as   | exempt, fill in the information be   | iow.   |   |
|  |   | ription of the property an<br>lle A/B that lists this prop   |   | Check only one box for each  | •  | cific laws that allow exemption   |
|  | Brief   |  | 0.450.00  | _  |  | 735 ILCS 5/12-1001(b)   |
|  | description:<br>Line from<br>Schedule A   |  | \$450.00  | \$450.0 \$450.0  |  |   |
|  | Brief   | 7D   |   | applicable statutory limit   |  | 735 ILCS 5/12-1001(a)   |
|  | description   | misc. clothing   | \$650.00  | \$650.0  | <br>00   | 700 1200 0, 12 100 1(a)   |
|  | Line from<br>Schedule A   | /B: <u>11</u>  |   | 100% of fair market value applicable statutory limit   | • •  |   |
| 3.   | (Subject to   | •  | every 3 years after that for  | <b>9,375?</b> cases filed on or after the date of adj  | ,  |   |

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First Name Doc 1

| alt Z. Auuli                                    | ionar r age  |   |   |                                    |
|---|--|---|---|------------------------------------|
|   | ription of the property and line<br>ule A/B that lists this property | Current value of<br>the portion you<br>own<br>Copy the value from<br>Schedule A/B | Amount of the exemption you claim  Check only one box for each exemption. | Specific laws that allow exemption |
| Brief<br>description<br>Line from<br>Schedule A |  | \$75.00   | \$75.00  100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b)              |
| Brief<br>description<br>Line from<br>Schedule A |  | \$400.00  | \$400.00 100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b)              |
| Brief<br>description<br>Line from<br>Schedule A |  | \$60.00   | \$60.00  100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b)              |
| Brief<br>description<br>Line from<br>Schedule A |  | \$5.00  | \$5.00  100% of fair market value, up to any applicable statutory limit   | 735 ILCS 5/12-1001(b)              |
| Brief<br>description<br>Line from<br>Schedule A |  | \$15.00   | \$15.00  100% of fair market value, up to any applicable statutory limit  | 735 ILCS 5/12-1001(b)              |

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| Deb                | otor 1   | Jessica<br>First Name  | Middle Name  | King<br>Last Name                |  |   |  |                                   |
|                    | otor 2<br>ouse, if filing)                           | First Name   | Middle Name  | Last Name                        |  |   |  |                                   |
| Unit               | ted States Ba  | nkruptcy Court for the: No   | orthern  | District of Illinois (State      |  |   |  |                                   |
|                    | se number<br>nown)                                   |  |  |                                  |  |   |  |                                   |
| Of                 | ficial F   | orm 106D   |  |                                  |  |   |  | eck if this is a<br>ended filing  |
| Sc                 | hedul  | le D: Creditor   | rs Who Hav   | ve Claims                        | <b>Secured</b>                         | by Prope  | rty  | 12/1                              |
| corr<br>forn<br>1. | Do any creed No. Ch                                  | ete and accurate as portion. If more space top of any additional ditors have claims secured eck this box and submit this foll in all of the information below. | is needed, copy t<br>pages, write your<br>by your property?<br>orm to the court with you | he Additional F<br>name and case | Page, fill it out, r<br>number (if kno | number the entricown).  | •  |                                   |
|                    | List all secu  | red claims. If a creditor has<br>e than one creditor has a par<br>the claims in alphabetical or  | ticular claim, list the other  | er creditors in Part 2.          | As much as                             | Column A  Amount of claim  Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1                | Santander C<br>Creditor's Na<br>PO Box 961<br>Number |  | Describe the propert  2012 Chevy Equinox    As of the date you file                      | Value: \$11,700.00               |  | \$24,138.00   | \$11,700.00  | \$12,438.00                       |
|                    | Fort Worth City Who owes Debtor                      | State ZIP Code the debt? Check one.  | Contingent Unliquidated Disputed Nature of lien. Check                                   |                                  | ок ан инасарру.                        |   |  |                                   |
|                    | Debtor 2   | 2 only<br>1 and Debtor 2 only  |  | u made (such as mor              | tgage or secured                       |   |  |                                   |
|                    | At least another                                     | one of the debtors and   |  | h as tax lien, mecha             | nic's lien)                            |   |  |                                   |
|                    | commu  | if this claim relates to a<br>unity debt<br>vas incurred <u>8/1/2015</u>   | Judgment lien from Other (including a  | right to offset)                 | 1000                                   |   |  |                                   |
|                    | -  | Add the dollar value of you  | Last 4 digits of acco  |                                  |  | \$24,138.00   |  |                                   |
|                    |  | nere:  |  | and pager inte                   |  | <del></del>   |  |                                   |

| E:II :                       | Alaia informa                                   | Case 16-14817   |   | 04/30/16  | Entered 04   | /30/16 00:05:10                                    | Desc                               | Main                         |                               |
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| FIII IN                      | tnis intorma                                    | ation to identify your case   |   |   | _ <del></del>  |  |                                    |                              |                               |
| Debto                        |   | Jessica   | A 4: 1 H A 1  | King  |  |  |                                    |                              |                               |
| Debto                        |   | First Name  | Middle Name   | Last N  | ame  |  |                                    |                              |                               |
|                              |   | First Name  | Middle Name   | Last N  | ame  |  |                                    |                              |                               |
| Unite                        | d States Ba                                     | nkruptcy Court for the:   | Northern  | District of Illi  | inois<br>State)  |  |                                    |                              |                               |
|                              | number  |   |   | (3  |  |  |                                    |                              |                               |
| (If kno                      |   |   |   |   |  |  | Char                               | .l. :f 4l.: :                |                               |
| Offi                         | cial Fc   | rm 106E/F   |   |   |  |  |                                    | ck if this is an             | amended filing                |
| Scl                          | hedu  | le E/F: Cre   | ditors Who  | Have U  | nsecure  | d Claims   |                                    |                              | 12/15                         |
| 106Å/E<br>are list<br>the bo | B) and on Sted in Sche<br>exes on the           | Schedule G: Executory edule D: Creditors Who left. Attach the Contin                      | xpired leases that could be<br>Contracts and Unexpire<br>to Hold Claims Secured be<br>truation Page to this page<br>Y Unsecured Claims              | ed Leases (Officially)  Property. If mose. On the top of a            | al Form 106G). Do<br>ore space is neede                      | not include any credito<br>d, copy the Part you ne | ors with parti<br>eed, fill it out | ally secured<br>, number the | l claims that<br>e entries in |
| 1.                           |   | ditors have priority unso   | secured claims against ye   | ou?   |  |  |                                    |                              |                               |
| i<br>I<br>I                  | identify wha<br>possible, list<br>Part 1. If mo | t type of claim it is. If a cla<br>the claims in alphabetic<br>ore than one creditor hold | claims. If a creditor has maim has both priority and no all order according to the crus a particular claim, list the laim, see the instructions for | onpriority amounts,<br>reditor's name. If you<br>e other creditors in | , list that claim here a<br>ou have more than t<br>n Part 3. | and show both priority and                         | d nonpriority a                    | amounts. As r                | much as                       |
|                              |   |   |   |   |  |  | Total claim                        | Priority amount              | Nonpriority amount            |
|                              |   |   |   |   |  |  |                                    |                              |                               |

Doc 1 Jessic Case 16-14817 Debtor 1 Documernt Page 24 of 70 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 AES/ESA \$1,154.00 Last 4 digits of account number 0001 Nonpriority Creditor's Name PO BOX 61047 When was the debt incurred? 1/1/2008 Street Number As of the date you file, the claim is: Check all that apply. Contingent HARRISBURG Pennsylvania 17106 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.2 AES/NCFC/FHLB \$5,434.00 0002 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 61047 When was the debt incurred? 9/1/2007 Number Street As of the date you file, the claim is: Check all that apply. Contingent Harrisburg Pennsylvania 17106 Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify **✓** No Yes 4.3 AES/NCFC/FHLB \$4,042.00 0003 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 61047 When was the debt incurred? 9/1/2007 Number Street As of the date you file, the claim is: Check all that apply. Contingent Harrisburg Pennsylvania 17106 Unliquidated Citv State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify

**✓** No Yes

Is the claim subject to offset?

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.  Total claim |   |   |            |  |  |  |
|---|---|---|------------|--|--|--|
| 4.4   | Capital One   | — Last 4 digits of account number 8136  | \$1,478.00 |  |  |  |
|   | Nonpriority Creditor's Name<br>Po Box 30281                         | When was the debt incurred? 7/1/2014  |            |  |  |  |
|   | Number Street   |   |            |  |  |  |
|   |   | As of the date you file, the claim is: Check all that apply.  |            |  |  |  |
|   | Salt Lake Cty Utah 84130  | Contingent  |            |  |  |  |
|   | City State Zip Code   | Unliquidated  |            |  |  |  |
|   | Who incurred the debt? Check one.  Debtor 1 only                    | Disputed  |            |  |  |  |
|   | Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|   | Debtor 1 and Debtor 2 only  | Student loans   |            |  |  |  |
|   | At least one of the debtors and another                             | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |  |
|   | Check if this claim relates to a community debt                     | Debts to pension or profit-sharing plans, and other similar debts                                       |            |  |  |  |
|   | Is the claim subject to offset?                                     | ✓ Other. Specify  |            |  |  |  |
|   | No  | • Salish Speedly  |            |  |  |  |
|   | ☐ Yes   |   |            |  |  |  |
| 4.5   | CAPITAL ONE BANK USA N  | Last A Pate of account and a  | \$1,492.00 |  |  |  |
|   | Nonpriority Creditor's Name   | — Last 4 digits of account number   | ψ1,102.00  |  |  |  |
|   | PO BOX 85520<br>Number Street                                       | When was the debt incurred? 7/1/2014  |            |  |  |  |
|   |   | As of the date you file, the claim is: Check all that apply.  |            |  |  |  |
|   | RICHMOND Virginia 23285   | Contingent  |            |  |  |  |
|   | City State Zip Code   | Unliquidated  |            |  |  |  |
|   | Who incurred the debt? Check one.  Debtor 1 only                    | Disputed  |            |  |  |  |
|   | <u> </u>  | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|   | Debtor 2 and Debtor 3 and   | Student loans   |            |  |  |  |
|   | Debtor 1 and Debtor 2 only  At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that                                       |            |  |  |  |
|   | 片   | you did not report as priority claims   |            |  |  |  |
|   | Check if this claim relates to a community debt                     | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify                    |            |  |  |  |
|   | Is the claim subject to offset?                                     | Other. Specify  |            |  |  |  |
|   | Yes   |   |            |  |  |  |
| 4.51  |   |   | <b>.</b>   |  |  |  |
| 4.6   | CHASE CARD Nonpriority Creditor's Name                              | Last 4 digits of account number   | \$1,186.00 |  |  |  |
|   | PO BOX 15298  | When was the debt incurred? 6/1/2015  |            |  |  |  |
|   | Number Street   | As of the date you file, the claim is: Check all that apply.  |            |  |  |  |
|   | - AND AND COOK  | Contingent  |            |  |  |  |
|   | WILMINGTON Delaware 19850 City State Zip Code                       | Unliquidated  |            |  |  |  |
|   | Who incurred the debt? Check one.                                   | Disputed  |            |  |  |  |
|   | Debtor 1 only   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|   | Debtor 2 only   | Student loans   |            |  |  |  |
|   | Debtor 1 and Debtor 2 only  | <b>=</b>  |            |  |  |  |
|   | At least one of the debtors and another                             | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |  |
|   | Check if this claim relates to a community debt                     | Debts to pension or profit-sharing plans, and other similar debts                                       |            |  |  |  |
|   | Is the claim subject to offset?                                     | ✓ Other. Specify  |            |  |  |  |
|   | ✓ No  |   |            |  |  |  |
|   | Yes   |   |            |  |  |  |

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.  Total claim |   |   |            |  |  |  |
|---|---|---|------------|--|--|--|
| 4.7   | CONSERVE  | — Last 4 digits of account number 1453  | \$9,936.00 |  |  |  |
|   | Nonpriority Creditor's Name<br>200 CROSS KEYS OFFICE PA | When was the debt incurred? 9/1/2012  |            |  |  |  |
|   | Number Street   |   |            |  |  |  |
|   |   | As of the date you file, the claim is: Check all that apply.  Contingent  |            |  |  |  |
|   | FAIRPORT New York 14450                                 |   |            |  |  |  |
|   | City State Zip Code  Who incurred the debt? Check one.  | Unliquidated  |            |  |  |  |
|   | Debtor 1 only   | Disputed  |            |  |  |  |
|   | Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|   | Debtor 1 and Debtor 2 only                              | Student loans   |            |  |  |  |
|   | At least one of the debtors and another                 | Obligations arising out of a separation agreement or divorce that you did not report as priority claims                         |            |  |  |  |
|   | Check if this claim relates to a community debt         | Debts to pension or profit-sharing plans, and other similar debts   |            |  |  |  |
|   | Is the claim subject to offset?                         | Other. Specify  |            |  |  |  |
|   | ✓ No  |   |            |  |  |  |
|   | Yes   |   |            |  |  |  |
| 4.8   | IL Secretary of State                                   | Last 4 digits of account number   | \$0.00     |  |  |  |
|   | Nonpriority Creditor's Name<br>2701 S. Dirksen Parkway  | When was the debt incurred?   |            |  |  |  |
|   | Number Street   | <del></del>   |            |  |  |  |
|   |   | As of the date you file, the claim is: Check all that apply.  |            |  |  |  |
|   | Springfield Illinois 62723                              | Contingent  |            |  |  |  |
|   | City State Zip Code                                     | Unliquidated  |            |  |  |  |
|   | Who incurred the debt? Check one.  Debtor 1 only        | Disputed  |            |  |  |  |
|   | Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|   | Debtor 1 and Debtor 2 only                              | Student loans   |            |  |  |  |
|   | At least one of the debtors and another                 | Obligations arising out of a separation agreement or divorce that<br>you did not report as priority claims                      |            |  |  |  |
|   | Check if this claim relates to a community debt         | Debts to pension or profit-sharing plans, and other similar debts   |            |  |  |  |
|   | Is the claim subject to offset?                         | Other. Specify  |            |  |  |  |
|   | ✓ No  | _   |            |  |  |  |
|   | Yes   |   |            |  |  |  |
| 4.9   | Triton College  | Last 4 digits of account number   | \$800.00   |  |  |  |
|   | Nonpriority Creditor's Name<br>2000 5th Ave             | When was the debt incurred?   |            |  |  |  |
|   | Number Street   |   |            |  |  |  |
|   |   | As of the date you file, the claim is: Check all that apply.  |            |  |  |  |
|   | River Grove Illinois 60171                              | Contingent  |            |  |  |  |
|   | City State Zip Code                                     | Unliquidated  |            |  |  |  |
|   | Who incurred the debt? Check one.  Debtor 1 only        | Disputed  |            |  |  |  |
|   | Debtor 2 only   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|   | Debtor 1 and Debtor 2 only                              | Student loans   |            |  |  |  |
|   | At least one of the debtors and another                 | <ul> <li>Obligations arising out of a separation agreement or divorce that<br/>you did not report as priority claims</li> </ul> |            |  |  |  |
|   | Check if this claim relates to a community debt         | Debts to pension or profit-sharing plans, and other similar debts   |            |  |  |  |
|   | Is the claim subject to offset?                         | ✓ Other. Specify  |            |  |  |  |
|   | ✓ No  | <u> </u>  |            |  |  |  |
|   | Yes   |   |            |  |  |  |

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

|      | After listing any entries on this page, number them beginning  | with 4.5, followed by 4.6, and so forth.  | Total claim             |
|------|--|---|-------------------------|
|      | U S DEPT OF ED/GSL/ATL  Nonpriority Creditor's Name PO BOX 2287  Number Street  ATLANTA Georgia 30301  City State Zip Code  Who incurred the debt? Check one.  ☑ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim relates to a community debt  Is the claim subject to offset?  ☑ No ☐ Yes  U S DEPT OF ED/GSL/ATL | Last 4 digits of account number   | Total claim \$10,782.00 |
|      | Nonpriority Creditor's Name PO BOX 2287 Number Street  ATLANTA Georgia 30301 City State Zip Code Who incurred the debt? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☑ No ☐ Yes  | Last 4 digits of account number 8329  When was the debt incurred? 3/1/2013  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  ✓ Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify | φορουσιού               |
| 4.12 | Village of Maywood Nonpriority Creditor's Name 40 Madison Street Number Street  Maywood Illinois 60153 City State Zip Code Who incurred the debt? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☑ No ☐ Yes                                | Last 4 digits of account number  When was the debt incurred?  | \$5,048.95              |

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Part 3: List Others to Be Notified About a Debt That You Already Listed

|                                      |   |  | · · · · · · · · · · · · · · · · · · ·   |
|--------------------------------------|---|--|---|
| collection agend<br>agency here. Sin | cy is trying to collect milarly, if you have mo | from you for a debt yore than one creditor | t your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you ots in Parts 1 or 2, do not fill out or submit this page. |
| Saint Xavier Univ                    | Saint Xavier University Name                    |  | On which entry in Part 1 or Part 2 did you list the original creditor?  |
| 3700 W. 103rd S                      | t.  |  | Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims   |
| Number Stre                          | eet   |  | Part 2: Creditors with Nonpriority Unsecured Claims   |
| Chicago                              | Illinois  | 60655                                      | Last 4 digits of account number 1453  |
| City                                 | State   | Zip Code                                   | <del></del>   |

Debtor 1 Jessic Case 16-14817
First Name Doc 1 Filed 04k30/16 Entered 04k30/16 00:05:10 Desc Main

Middle Name Docume Titme Page 29 of 70 Part 4: Add the Amounts for Each Type of Unsecured Claim

|                             | Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159.  Add the amounts for each type of unsecured claim.   |     |              |  |  |  |  |  |  |  |
|-----------------------------|---|-----|--------------|--|--|--|--|--|--|--|
|                             |   |     | Total claims |  |  |  |  |  |  |  |
| Total claims<br>from Part 1 | 6a. Domestic support obligations.   | 6a. | \$0.00       |  |  |  |  |  |  |  |
|                             | <ul> <li>6b. Taxes and certain other debts you owe the government</li> <li>6c. Claims for death or personal injury while you were intoxicated 6</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> </ul> |     | \$0.00       |  |  |  |  |  |  |  |
|                             |   |     | \$0.00       |  |  |  |  |  |  |  |
|                             |   |     | \$0.00       |  |  |  |  |  |  |  |
|                             | 6e. Total. Add lines 6a through 6d.   | 6e. | \$0.00       |  |  |  |  |  |  |  |
|                             |   |     | Total claims |  |  |  |  |  |  |  |
| Total claims from Part 2    | 6f. Student loans   | 6f. | \$27,770.00  |  |  |  |  |  |  |  |
|                             | 6g. Obligations arising out of a separation agreement or divo   |     | \$0.00       |  |  |  |  |  |  |  |
|                             | 6h. Debts to pension or profit-sharing plans, and other similar debts   | 6h. | \$0.00       |  |  |  |  |  |  |  |
|                             | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  | 6i. | \$19,940.95  |  |  |  |  |  |  |  |
|                             | 6j. Total. Add lines 6f through 6i.   | 6j. | \$47,710.95  |  |  |  |  |  |  |  |

|                                 | 0 10 1 101                               | 7 Dag 1 Filad 0                   | 4/00/4C Fishers                      | 104/00/46 00:05:40  | Daga Main  |
|---------------------------------|--|-----------------------------------|--------------------------------------|---|--|
| Fill in this inform             | Case 16-1481 ation to identify your case |                                   | 4/30/16 Entered                      | 04/30/16 00:05:10   | Desc Main  |
| Debtor 1                        | Jessica<br>First Name                    | Middle Name                       | King<br>Last Name                    |   |  |
| Debtor 2<br>(Spouse, if filing) |  | Middle Name                       | Last Name                            |   |  |
|                                 | ankruptcy Court for the:                 | Northern                          | Last Name  District of Illinois      |   |  |
| Case number                     |  | Northern                          | (State)                              | _   |  |
| Official F                      | Form 106G                                |                                   |                                      |   | Check if this is a amended filing                                |
| Schedul                         | e G: Execut                              | ory Contracts                     | and Unexpire                         | d Leases  | 12/1   |
|                                 | l, copy the additional p                 |                                   |                                      |   | ing correct information. If more onal pages, write your name and |
|                                 | , ,                                      | contracts or unexpired            |                                      |   |  |
| No. Che                         | ck this box and file this for            | m with the court with your othe   | r schedules. You have nothin         | g else to report on this form.  |  |
| Yes. Fill i                     | in all of the information be             | elow even if the contracts or lea | ases are listed on <i>Schedule</i> A | A/B: Property (Official Form 106A                                     | /B).   |
|                                 |  |                                   |                                      | state what each contract or lead<br>camples of executory contracts an |  |
| Person                          | or company with whor                     | n you have the contract or le     | ease                                 | State what the contract   | t or lease is for  |
| 2.1 Public Sto                  | orage                                    |                                   |                                      | Other,<br>Other,  |  |
| Name                            |  |                                   |                                      | Month to month lease  |  |

P.O. Box 25050 Number

Glendale City Street

California State 91221 Zip Code

|              |                     | Case 16-1481                | 7 Doc 1 Filed 0   | 4/30/16 Entered                 | 04/30/16 00:05:10                  | Desc Main  |
|--------------|---------------------|-----------------------------|---|---------------------------------|------------------------------------|--|
| Fill         | in this inform      | ation to identify your case |   | Ü                               | 0/10 00:00:10                      | Description  |
| De           | btor 1              | Jessica<br>First Name       | Middle Name   | King<br>Last Name               | _                                  |  |
|              | btor 2              |                             |   |                                 | _                                  |  |
| (Sp          | ouse, if filing)    | First Name                  | Middle Name   | Last Name                       |                                    |  |
| Un           | ited States Ba      | ankruptcy Court for the:    | Northern  | District of Illinois            |                                    |  |
|              | se number<br>(nown) |                             |   | (State)                         | _                                  |  |
|              |                     |                             |   |                                 |                                    | Check if this is a amended filing  |
| $\bigcirc$ 1 | ficial F            | orm 106H                    |   |                                 |                                    | aniended illing  |
|              |                     | -                           |   |                                 |                                    |  |
| 50           | nedui               | e H: Your Co                | debtors   |                                 |                                    | 12/1   |
| ever         | y question.         |                             |   | list either spouse as a codebto |                                    | ase number (if known). Answer  |
|              | Louisiana, N        |                             | ived in a community proper<br>erto Rico, Texas, Washington, |                                 | unity property states and territor | ies include Arizona, California, Idaho,  |
|              |                     |                             | ouse, or legal equivalent live v                            | vith you at the time?           |                                    |  |
|              | ☐ Y                 |                             | tate or territory did you live?                             | Fill in the                     | name and current address of th     | at person.   |
|              |                     | Name of your spouse, for    | ormer spouse, or legal equival                              | ent                             | -                                  |  |
|              |                     | Number Street               |   |                                 | -                                  |  |
|              |                     | City                        | State   | Zip Code                        | -                                  |  |
| 3.           | as a codeb          | tor only if that person is  | s a guarantor or cosigner. I                                | Make sure you have listed the   |                                    | the person shown in line 2 again<br>ficial Form 106D), <i>Schedule E/F</i><br>olumn 2. |
|              | Column 1:           | Your codebtor               |   |                                 | Column 2: The creditor to          | whom you owe the debt  |

Check all schedules that apply:

| Fill in th             | nis information to identify                              | your case:   |                                     |               | 0/16 00:               | :05:10  | Desc M           | ain     |               |
|------------------------|--|--|-------------------------------------|---------------|------------------------|---|------------------|---------|---------------|
| Debtor 1               | Jessica  | Docai  | King                                | C 02 01       | 70                     |   |                  |         |               |
| Debior 1               | First Name   | Middle Name  | Last Name                           |               | -                      |   |                  |         |               |
| Debtor 2               |  |  |                                     |               | _                      | Check if this   |                  |         |               |
| (Spouse, i             | if filing) First Name                                    | Middle Name  | Last Name                           |               |                        | =   | nded filing      |         |               |
| United Sta             | ates Bankruptcy Court for the:                           | Northern   | District of Illinois (State)        |               | -                      | A supplement showing post-petition chapter expenses as of the following date: |                  |         |               |
| Case num<br>(If known) | nber   |  |                                     |               | _                      | MM / DI   | D/YYYY           | -       |               |
| Officia                | al Form 106I   |  |                                     |               |                        |   |                  |         |               |
| 3che                   | dule I: Your Inc   | ome  |                                     |               |                        |   |                  |         | 12/           |
| nformat                | tion about your spouse<br>vrite your name and ca         | r spouse. If you are sep<br>e. If more space is neede<br>se number (if known). A<br>nt | ed, attach a se                     | parate s      |                        |   |                  |         |               |
| 1.                     | Fill in your employment                                  |  | Debtor 1                            |               | Debtor 2               |   |                  |         |               |
|                        | information.   | Employment status  | Employed  Not Employed              |               | Employed  Not Employed |   |                  |         |               |
|                        | If you have more than one                                |  |                                     |               |                        |   |                  |         |               |
|                        | job,<br>attach a separate page with                      |  |                                     |               |                        | ipioyed   |                  |         |               |
|                        | information about additional                             | Occupation   | Merchandising N                     | lanager.      |                        |   |                  |         |               |
|                        | employers.   | Employer's name  | Victoria's Secret                   | Stores, LL0   | <u> </u>               |   |                  |         |               |
|                        | Include part time, seasonal,                             | ' Employer's address   | Four Limited Parkway  Number Street |               |                        |   |                  |         |               |
|                        | or<br>self-employed work.                                |  |                                     |               | Number Street          |   |                  |         |               |
|                        | Occupation may include student                           |  |                                     |               |                        |   |                  |         |               |
|                        | or homemaker, if it applies.                             |  | Reynoldsbur<br>g                    | Ohio          | 43068                  | City  | S                | ate     | Zip Code      |
|                        |  |  | City                                | State         | Zip Code               |   |                  |         |               |
|                        |  | How long employed there?   | 9 years 1 month                     |               |                        |   |                  |         |               |
| Dort 2                 | Give Details About I                                     | Manthly Income   |                                     |               |                        |   |                  |         |               |
| rail 2.                | Give Details About I                                     | wontiny income   |                                     |               |                        |   |                  |         |               |
| Estimate are sepa      |  | date you file this form. If you ha   | ave nothing to repo                 | t for any lin | e, write \$0 in the s  | pace. Include   | e your non-filir | ng spou | se unless you |
|                        | your non-filing spouse have mo<br>te sheet to this form. | re than one employer, combine the  | ne information for al               | employers     | for that person on     |   | ·                | d more  | space, attach |
|                        |  |  |                                     | For           | Debtor 1               | For Debte   |                  |         |               |
| ded                    | ductions.) If not paid monthly, ca                       | y, and commissions (before all<br>lculate what the monthly wage wo                     | ould be.                            |               | \$3,724.96             |   |                  | -       |               |
| 3. <b>Est</b>          | imate and list monthly overt                             | ime pay.   | 3.                                  |               | + \$0.00               |   |                  | _       |               |
| 4. Cal                 | Iculate gross income. Add lin                            | e 2 + line 3.  | 4.                                  |               | \$3,724.96             |   |                  | _       |               |

Filed 04/30/16 Entered @4/30/16 00:05:10 Desc Main Jessica Case 16-14817 Doc 1 Middle Name Documentame Page 33 of 70 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$3,724.96 5. List all payroll deductions: \$852.26 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$182.30 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$1,034.56 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,690.39 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. \$2,690.39 \$2,690.39 10 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$2,690.39 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

| <b>-</b>   | Case 16-1481                       |  | 04/30/16 Entered 04   | 4/30/16 00:05:10                    | Desc Maiı            | n             |
|--|------------------------------------|--|---|-------------------------------------|----------------------|---------------|
| Fill in this info  | rmation to identify your case      | 9:   | J   |                                     |                      |               |
| Debtor 1   | Jessica                            |  | King  | -                                   |                      |               |
| Dobtor 2   | First Name                         | Middle Name  | Last Name   | Check if this is:                   |                      |               |
| Debtor 2<br>(Spouse, if filing   | ng) First Name                     | Middle Name  | Last Name   | - An amended filing                 |                      |               |
| l laita d Otata a  | Danilius inter Carretta de anti-ar | N a wife a wa                                      | District of Illinois  |                                     | uina noot notitic    | on chapter 12 |
| United States  | Bankruptcy Court for the:          | Northern   | District of Illinois (State)  | A supplement sho expenses as of the | •                    | •             |
| Case number  |                                    |  | ,   | _                                   |                      |               |
| (If known)   |                                    |  |   | MM / DD / YYYY                      |                      |               |
| Official   | Form 106J                          |  |   |                                     |                      |               |
|  | ıle J: Your Ex                     | nancac   |   |                                     |                      | 12/1          |
|  |                                    | •  |   |                                     |                      | 12/1;         |
| nformation. If   |                                    |  | re filing together, both are equa<br>form. On the top of any addition |                                     |                      | ber           |
| Part 1: Des  | scribe Your Househo                | old  |   |                                     |                      |               |
| 1. Is this a jo  |                                    |  |   |                                     |                      |               |
| ✓ No. G  | io to line 2                       |  |   |                                     |                      |               |
|  | Does Debtor 2 live in a se         | narata housahold?                                  |   |                                     |                      |               |
| 1es. L   |                                    | parate riouseriolu:                                |   |                                     |                      |               |
|  | No                                 |  |   |                                     |                      |               |
|  | Yes. Debtor 2 must file            | Official Forms 106J-2, Exper                       | nses for Separate Household of De                                     | ebtor 2.                            |                      |               |
| 2. Do you ha   | ve dependents?                     | 0  |   |                                     |                      |               |
| Do not list I<br>Debtor 2.   |                                    | es. Fill out this information for<br>ach dependent | Dependent's relationship<br>Debtor 1 or Debtor 2                      | to Dependent's age                  | Does depen with you? | dent live     |
| •  | xpenses include                    | 0  |   |                                     |                      |               |
| expenses<br>than   | or poople earler                   |  |   |                                     |                      |               |
| yourself ar  | •                                  | es   |   |                                     |                      |               |
| dependen   | ts?                                |  |   |                                     |                      |               |
| Part 2: Est  | imate Your Ongoing                 | Monthly Expenses                                   |   |                                     |                      |               |
| •  | of a date after the bankru         |  | you are using this form as a supplemental Schedule J, check           | • •                                 | •                    |               |
| Include expe   | enses paid for with non-ca         | ash government assistance                          | e if you know the value of  |                                     |                      |               |
|  |                                    | on Schedule I: Your Incom                          |   |                                     | Yo                   | our expenses  |
| <ol> <li>The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4.</li> </ol> |                                    |  |   |                                     |                      | \$600.00      |
| If not inc   | cluded in line 4:                  |  |   |                                     |                      |               |
| 4a. Real   | estate taxes                       |  |   |                                     | 4a                   | \$0.00        |
| 4b. Prope  | erty, homeowner's, or renter       | 's insurance                                       |   |                                     | 4b.                  | \$0.00        |
| 4c. Home   | e maintenance, repair, and up      | okeep expenses                                     |   |                                     | 4c.                  | \$0.00        |

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Jessic Case 16-14817 Doc 1 Filed 04/30/16 Entered 04/30/16 00:05:10 Desc Main

Document Page 36 of 70 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$175.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies 7. \$375.00 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$70.00 9. 10. Personal care products and services \$70.00 10. 11. Medical and dental expenses \$19.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$375.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$128.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$557.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: Storage Unit \$121.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

| Debtor 1          | JessicaCase 16-1481               | 7 Doc 1           | Filed 04/39/16                | Entered 04/30/1        | 6 00 05:10 Des | sc Main    |
|-------------------|-----------------------------------|-------------------|-------------------------------|------------------------|----------------|------------|
|                   | First Name                        | Middle Name       | Document Militage             | Page 37 of 70          |                |            |
| 21. <b>Other.</b> | Specify:                          |                   |                               | -                      | 21             | \$0.00     |
|                   |                                   |                   |                               |                        |                |            |
|                   | ate your monthly expenses.        |                   |                               |                        |                | \$2,490.00 |
|                   | dd lines 4 through 21.            |                   |                               | _                      |                | \$0.00     |
|                   | opy line 22 (monthly expenses f   | ,-                | •                             | -2                     |                | \$2,490.00 |
| 22c. Ad           | dd line 22a and 22b. The result i | s your monthly e  | xpenses.                      |                        | 22.            |            |
| 23. Calcula       | ate your monthly net income       | -                 |                               |                        |                |            |
| 23a. Co           | opy line 12 (your combined mon    | thly income) fror | n Schedule I.                 |                        | 23a            | \$2,690.39 |
| 23b. Co           | opy your monthly expenses from    | line 22 above.    |                               |                        | 23b            | \$2,490.00 |
|                   | ubtract your monthly expenses fr  |                   | r income.                     |                        |                | \$200.39   |
| Т                 | he result is your monthly net inc | come.             |                               |                        | 23c            |            |
| 24. <b>Do yo</b>  | u expect an increase or decre     | ease in your ex   | penses within the year af     | er you file this form? |                |            |
| For ex            | kample, do you expect to finish p | aying for your ca | ar loan within the year or do | you expect your        |                |            |
| mortg             | age payment to increase or dec    | crease because    | of a modification to the term | s of your mortgage?    |                |            |
| □N                | 0                                 |                   |                               |                        |                |            |
| ✓ Ye              | es                                |                   |                               |                        |                |            |
| _                 | Explain here:                     |                   |                               |                        |                |            |
|                   | Utilities included with           | rent.             |                               |                        |                |            |
|                   |                                   |                   |                               |                        |                |            |
|                   |                                   |                   |                               |                        |                |            |
|                   |                                   |                   |                               |                        |                |            |
|                   |                                   |                   |                               |                        |                |            |

|       |                   | Case 16-1481  | 7 Doc 1 Filed               | 04/30/16             | Entered 0/1              | <u>/3</u> 0/16 00:05:10     | Desc Main   |
|-------|-------------------|---|-----------------------------|----------------------|--------------------------|-----------------------------|---|
| Fill  | in this inform    | nation to identify your cas                         |                             | · /=/: I: // I : /   |                          | 0/10 00.03.10               | Desc Main   |
| Del   | otor 1            | Jessica   |                             | King                 |                          |                             |   |
|       | otor 2            | First Name  | Middle Name  Middle Name    | Last N               |                          |                             |   |
| (Op   | ouse, ii iiiiig   | riist name  | Middle Name                 | Lastr                | varne                    |                             |   |
| Uni   | ted States B      | ankruptcy Court for the:                            | Northern                    | District of II       | linois<br>State)         |                             |   |
|       | se number         |   |                             |                      |                          |                             |   |
| (If K | nown)             |   |                             |                      |                          |                             | Check if this is a  |
| Of    | ficial F          | Form 106De  | eC                          |                      |                          |                             | amended filing  |
|       |                   |   | <u> </u>                    | ahtar's              | Schadula                 | 2                           | 12/1  |
|       |                   |   |                             |                      |                          |                             | 12/1-   |
|       |                   |   | er, both are equally respor |                      |                          |                             |   |
|       |                   |   |                             |                      |                          |                             | ing property, or obtaining money or<br>rs, or both. 18 U.S.C. §§ 152, 1341, |
|       | , and 3571.       | au iii ooiiiicolloii willi u                        | barna aproy dade dan reda   | iit iii iiiico up to | Ψ200,000, 01 IIIIp11     | somment for up to 20 year   | 13, 01 5041. 10 0.0.0. 33 102, 1041,  |
|       |                   |   |                             |                      |                          |                             |   |
| Par   | t 1: Sign         | Below   |                             |                      |                          |                             |   |
|       | Did you pa        | ay or agree to pay some                             | eone who is NOT an attorn   | ey to help you       | fill out bankruptcy      | forms?                      |   |
|       | <b>√</b> No       |   |                             |                      |                          |                             |   |
|       |                   | Name of person                                      |                             | Λttoo                | h Pankruntov Potitio     | n Preparer's Notice, Declar | ration and  |
|       | 165. 1            | varne or person                                     |                             |                      | nture (Official Form 1   |                             | auon, and   |
|       |                   |   |                             |                      |                          |                             |   |
|       |                   |   |                             |                      |                          |                             |   |
|       |                   |   |                             |                      |                          |                             |   |
|       |                   |   | - d(1)                      |                      | lata e Clada de de de de | . dealered en en l          |   |
|       |                   | iaity of perjury, i deciar<br>are true and correct. | e that I have read the sum  | mary and sche        | aules filea with this    | s declaration and           |   |
| ×     | /s/ Jessica       | a King  |                             |                      | ×                        |                             |   |
|       | Signature of      |   |                             |                      | Signature of D           | ebtor 2                     |   |
|       | Data Albai        | 2016  |                             |                      | Data                     |                             |   |
|       | Date <u>4/30/</u> | <u>2016</u><br>'DD/YYYY                             |                             |                      | Date<br>MM/DD            | /YYYY                       |   |

| Fill in this information to identify your of Debtor 1 Jessica              |                                  |                           |                     |                      |                |                                   |
|--|----------------------------------|---------------------------|---------------------|----------------------|----------------|-----------------------------------|
|  |                                  | King                      | J                   |                      |                |                                   |
| First Name Debtor 2  | Middle Name                      | Last Na                   | ame                 |                      |                |                                   |
| (Spouse, if filing) First Name   | Middle Name                      | Last Na                   | ame                 |                      |                |                                   |
| United States Bankruptcy Court for the                                     | : Northern                       | District of Illin         | nois<br>tate)       |                      |                |                                   |
| Case number (If known)   |                                  | (31                       |                     |                      |                |                                   |
| Official Form 107  |                                  |                           |                     |                      |                | Check if this is a amended filing |
| Statement of Finan   | cial Affairs fo                  | r Individua               | als Filing          | for Bankr            | uptcy          | 12/1                              |
| Be as complete and accurate as pos<br>space is needed, attach a separate s | ssible. If two married peop      | le are filing togethe     | er, both are equall | y responsible for    | supplying corr |                                   |
| •  |                                  |                           |                     | ii iiaiiie aiiu case | number (ii kno | wiij. Aliswei every questioi      |
| Part 1: Give Details About Yo  |                                  | Where You Liv             | ed Before           |                      |                |                                   |
| 1. What is your current marital  | status?                          |                           |                     |                      |                |                                   |
| <ul><li>✓ Married</li><li>✓ Not married</li></ul>                          |                                  |                           |                     |                      |                |                                   |
| 2. During the last 3 years, have   | you lived anywhere other         | than where you live       | now?                |                      |                |                                   |
| No No List all of the places w   | ou lived in the last 3 years. Do | a not include where w     | ou live now         |                      |                |                                   |
| res. List all of the places ye   | ou lived in the last 3 years. Do | o not include where yo    | ou live now.        |                      |                |                                   |
| Debtor 1:  | Da<br>the                        | tes Debtor 1 lived<br>ere | Debtor 2:           |                      |                | Dates Debtor 2 lived there        |
|  |                                  |                           | Same as I           | Debtor 1             |                | Same as Debtor 1                  |
| 1924 S 10th Ave  | Fro                              | om 4/1/2012               |                     |                      |                | From                              |
| Number Street  | То                               | 4/11/2016                 | Number Stree        | et<br>               |                |                                   |
| Maywood Illinois   | 60153                            |                           |                     |                      |                | <del></del>                       |
| City State   | Zip Code                         |                           | City                | State                | Zip Code       | •                                 |
|  |                                  |                           | Same as I           | Debtor 1             |                | Same as Debtor 1                  |
| Number Street  | Fro                              | om                        | Number Stree        | et                   |                | From                              |
|  | То                               |                           |                     |                      |                | . То                              |
| City State   | Zip Code                         |                           | City                | State                | Zip Code       |                                   |
| 3. Within the last 8 years, did you  | ever live with a spouse or       | r legal equivalent in     | a community pro     | perty state or terr  | itorv? (Commu  | nitv property states and          |
| territories include Arizona, Califor                                       | •                                | • .                       |                     |                      |                | my property states and            |
| <b>✓</b> No  |                                  |                           |                     |                      |                |                                   |
| Yes. Make sure you fill out So   | chedule H: Your Codebtors (      | Official Form 106H).      |                     |                      |                |                                   |

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| CONTRACT TO THE PROPERTY OF TH | <u> </u>    | 1 1100 0 11 <del>0 9/ ± 0</del> | Elicolog Galage |
|--|-------------|---------------------------------|-----------------|
| st Name  | Middle Name | Documetht end                   | Page 40 of 70   |

|   | ent or from operating a busines                             | ss during this year or the                                       | two previous calendar vears?                           | ?  |
|---|---|--|--|--|
|   | d from all jobs and all businesses                          | , including part-time  |  | •  |
| activities. If you are filing a joint case and you No                   | nave income that you receive tog                            | etner, list it only once under                                   | Deptor 1.  |  |
| Yes. Fill in the details.   |   |  |  |  |
| _   |   |  |  |  |
|   | Debtor 1  |  | Debtor 2   |  |
|   | Sources of income<br>Check all that apply.                  | Gross income<br>(before deductions and<br>exclusions)            | Sources of income<br>Check all that apply.             | Gross income<br>(before deductions a<br>exclusions)            |
| From January 1 of current year until the date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips  Operating a business   | \$10000.00   | Wages, commissions, bonuses, tips Operating a business |  |
| For last calendar year: (January 1 to December 31,                      | ✓ Wages, commissions, bonuses, tips  Operating a business   | \$39646.00   | Wages, commissions, bonuses, tips Operating a business |  |
| For the calendar year before that: (January 1 to December 31,           | ✓ Wages, commissions, bonuses, tips  ☐ Operating a business | \$36110.00   | Wages, commissions, bonuses, tips Operating a business |  |
|   |   | lude income that you listed                                      | in line 4.   |  |
| No Yes. Fill in the details.  |   | lude income that you listed                                      | in line 4.   |  |
| No Yes. Fill in the details.  | Debtor 1  | lude income that you listed                                      | in line 4.  Debtor 2                                   |  |
|   | Debtor 1  Sources of income Describe below.                 | Gross income from each source (before deductions and exclusions) |  | Gross income from each source (before deductions a exclusions) |
|   | Sources of income   | Gross income from each source (before deductions and             | Debtor 2 Sources of income                             | each source<br>(before deductions a                            |
| Yes. Fill in the details.  From January 1 of current year until         | Sources of income   | Gross income from each source (before deductions and             | Debtor 2 Sources of income                             | each source<br>(before deductions a                            |

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List Certain Payments You Made Before You Filed for Bankruptcy

Part 3:

#### 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors City State Zip Code Other

JessicaCase 16-14817 Doc 1 Debtor 1 Document Page 42 of 70 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

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First Name Doc 1

| outes.   |                |                     |   |                  |          |                                     |
|--|----------------|---------------------|---|------------------|----------|-------------------------------------|
| No   |                |                     |   |                  |          |                                     |
| Yes. Fill in the details.  | Nature o       | of the case         | Court or  | agency           |          | Status of the case                  |
| Case title   |                |                     |   |                  |          | Pending                             |
| Construction   |                |                     | Court Nar   | me               |          | On appeal                           |
| Case number  |                |                     | Number S  | Street           |          | Concluded                           |
|  |                |                     | City  | State            | Zip Code | _                                   |
| Case title   |                |                     | Court No.   |                  |          | Pending                             |
| Case number  |                |                     | Court Nar   |                  |          | On appeal Concluded                 |
|  |                |                     | Number S  | Street           |          | Concided                            |
|  |                |                     | City  | State            | Zip Code |                                     |
| neck all that apply and fill in the o  | letails below. | of your property re |   | eclosed, garnish | Date     | Value of the                        |
| heck all that apply and fill in the one of the control of the cont | letails below. |                     |   | eclosed, garnish |          |                                     |
| heck all that apply and fill in the o  | letails below. |                     | operty  | eclosed, garnish |          | Value of the                        |
| heck all that apply and fill in the one of the control of the cont | letails below. | Describe the pro    | ppened  | eclosed, garnish |          | Value of the                        |
| No. Go to line 11. Yes. Fill in the information be  Creditor's Name  | letails below. | Describe the pro    | ppened repossessed.   | eclosed, garnish |          | Value of the                        |
| No. Go to line 11. Yes. Fill in the information be  Creditor's Name  | letails below. | Explain what ha     | ppened repossessed. foreclosed. garnished.                  |                  |          | Value of the                        |
| No. Go to line 11. Yes. Fill in the information be  Creditor's Name  | letails below. | Explain what ha     | ppened repossessed. foreclosed. garnished. attached, seized |                  | Date     | Value of the property               |
| No. Go to line 11. Yes. Fill in the information be  Creditor's Name  Number Street   | details below. | Explain what ha     | ppened repossessed. foreclosed. garnished. attached, seized |                  |          | Value of the                        |
| No. Go to line 11. Yes. Fill in the information be  Creditor's Name  Number Street  City State   | details below. | Explain what ha     | ppened repossessed. foreclosed. garnished. attached, seized |                  | Date     | Value of the property  Value of the |
| No. Go to line 11. Yes. Fill in the information be  Creditor's Name  Number Street   | details below. | Describe the pro    | ppened repossessed. foreclosed. garnished. attached, seized |                  | Date     | Value of the property  Value of the |
| No. Go to line 11. Yes. Fill in the information be  Creditor's Name  Number Street  City State   | details below. | Explain what ha     | ppened repossessed. foreclosed. garnished. attached, seized |                  | Date     | Value of the property  Value of the |

| Deb  | tor 1     | Jessic Case 16-14817 Doc 1 First Name Middle Name   | <del>-iled 04/30/16 <u>Entered</u> 04/30/16 /0</del> 0፡05<br>Document Page 44 of 70 | :10 Desc                 | Main                     |
|------|-----------|---|---|--------------------------|--------------------------|
| 11.  |           | nin 90 days before you filed for bankruptcy, did<br>ounts or refuse to make a payment because you<br>No | any creditor, including a bank or financial institution, set o                      | off any amounts fo       | rom your                 |
|      | Ħ         | Yes. Fill in the details.   |   |                          |                          |
|      |           |   | Describe the action the creditor took   | Date action was taken    | Amount                   |
|      |           | Creditor's Name   | <del></del>   |                          |                          |
|      |           | Number Street   |   |                          |                          |
|      |           |   | Last 4 digits of account number: XXXX-  |                          |                          |
|      |           | City State Zip Code   |   |                          |                          |
| 12.  |           | iin 1 year before you filed for bankruptcy, was a<br>iver, a custodian, or another official?            | any of your property in the possession of an assignee for th                        | ne benefit of cred       | itors, a court-appointed |
|      | $\square$ | No<br>Yes   |   |                          |                          |
| Part | 5:        | List Certain Gifts and Contributions  |   |                          |                          |
| 13.  | Wit       | thin 2 years before you filed for bankruptcy, did   | you give any gifts with a total value of more than \$600 per                        | person?                  |                          |
|      | <b>✓</b>  | No Yes. Fill in the details for each gift.  |   |                          |                          |
|      |           | Gifts with a total value of more than \$600 per person  | Describe the gifts  | Dates you gave the gifts | Value                    |
|      |           | Person to Whom You Gave the Gift  |   |                          |                          |
|      |           |   |   |                          |                          |
|      |           | Number Street   |   |                          |                          |
|      |           | City State Zip Code Person's relationship to you  |   |                          |                          |
|      |           | - Crossic rotations in you  |   |                          |                          |
|      |           | Person to Whom You Gave the Gift  |   |                          |                          |
|      |           | Number Street   |   |                          |                          |
|      |           | City State Zip Code   |   |                          |                          |
|      |           | Person's relationship to you  | _   |                          |                          |
|      |           |   |   |                          |                          |

|      |          | First Name                                      | Milddle Name                 | ocument Page 45 of 70 Page 45 of 70  |                                   |                        |
|------|----------|---|------------------------------|--|-----------------------------------|------------------------|
| 14.  | With     | nin 2 years before you                          |                              | u give any gifts or contributions with a total value of mor  | e than \$600 to an                | y charity?             |
|      | <b>✓</b> | No<br>Yes. Fill in the details for              | r each gift or contribution. |  |                                   |                        |
|      | _        | Gifts with a total value per person             | -                            | Describe the gifts   | Dates you gave the gifts          | Value                  |
|      |          | Charity's Name                                  |                              | -  |                                   |                        |
|      |          |   |                              | _  |                                   |                        |
|      |          | Number Street                                   | 7.0.1                        | _  |                                   |                        |
| Part | · 6· I   | City St   | tate Zip Code                |  |                                   |                        |
| 15.  | With     | in 1 year before you fil                        |                              | you filed for bankruptcy, did you lose anything because  | of theft, fire, othe              | r disaster, or         |
|      | _        | <b>bling?</b><br>No                             |                              |  |                                   |                        |
|      |          | Yes. Fill in the details.                       |                              |  |                                   |                        |
|      |          | Describe the property how the loss occurred     |                              | Describe any insurance coverage for the loss  Include the amount that insurance has paid. List pending                         | Date of your loss                 | Value of property lost |
|      |          |   |                              | insurance claims on line 33 of Schedule A/B: Property.   |                                   |                        |
|      |          |   |                              |  |                                   |                        |
| Part | 7: I     | List Certain Payme                              | ents or Transfers            |  |                                   |                        |
| 16.  | seek     | ing bankruptcy or prep                          | paring a bankruptcy petition | or anyone else acting on your behalf pay or transfer any par?  dit counseling agencies for services required in your bankrupto |                                   | ne you consulted about |
|      |          | No<br>Yes. Fill in the details.                 |                              |  |                                   |                        |
|      | _        |   |                              | Description and value of any property transferred  | Date payment or transfer was made | Amount of payment      |
|      |          | Semrad Law Firm                                 |                              | Attorney's Fee - 350.00  | 4/11/2016                         | \$350.00               |
|      |          | Person Who Was Paid<br>20 South Clark Street 28 | 8th Floor                    |  |                                   |                        |
|      |          | Number Street                                   | out Floor                    | _  |                                   |                        |
|      |          |   | inois 60606                  | -<br>-   |                                   |                        |
|      |          |   | tate Zip Code                | _  |                                   |                        |
|      |          | Email or website address  Person Who Made the F |                              | _  |                                   |                        |
|      |          |   | rayment, ii Not fou          |  | <u> </u>                          |                        |
|      |          | Person Who Was Paid                             |                              | _  |                                   |                        |
|      |          | Number Street                                   |                              | _  |                                   |                        |
|      |          | City St   | tate Zip Code                | _  |                                   |                        |
|      |          | Email or website address                        | SS .                         | _  |                                   |                        |
|      |          | Person Who Made the F                           | Payment, if Not You          | _  |                                   |                        |

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| Deb | otor 1         | JessicaCase 16-14817 First Name   |  | d 04/39/16<br>cumethtee          | Entered 04/30<br>Page 46 of 70 | <b>/16</b> /00:05: | : <u>10 Desc</u>                        | <u>Main</u> |                        |
|-----|----------------|---|--|----------------------------------|--------------------------------|--------------------|---|-------------|------------------------|
| 17. | you            | nin 1 year before you filed for ba<br>deal with your creditors or to ma<br>not include any payment or transfer t  | ake payments to you                          | r creditors?                     | ng on your behalf pay o        | or transfer any p  | property to anyor                       | ne who p    | promised to help       |
|     | <b>✓</b>       | No<br>Yes. Fill in the details.   |  |                                  |                                |                    |   |             |                        |
|     |                |   |  | Description and                  | d value of any property        | transferred        | Date payment<br>or transfer<br>was made | Amoui       | nt of payment          |
|     |                | Person Who Was Paid   |  |                                  |                                |                    |   |             |                        |
|     |                | Number Street   |  |                                  |                                |                    |   |             |                        |
|     |                | City State  | Zip Code                                     |                                  |                                |                    |   |             |                        |
| 18. | Inclu<br>trans | nin 2 years before you filed for be nary course of your business or de both outright transfers and transfers that you have already listed on No Yes. Fill in the details. | financial affairs?<br>sfers made as security |                                  |                                |                    |   | -           |                        |
|     |                |   |  | Description and property transfe |                                |                    | property or paymets paid in exch        |             | Date transfer was made |
|     |                | Person Who Received Transfer  |  |                                  |                                |                    |   |             |                        |
|     |                | Number Street   |  |                                  |                                |                    |   |             |                        |
|     |                | City State<br>Person's relationship to you  | Zip Code                                     |                                  |                                |                    |   |             |                        |
|     |                | Person Who Received Transfer  |  |                                  |                                |                    |   |             |                        |
|     |                | Number Street   |  |                                  |                                |                    |   |             |                        |
|     |                | City State<br>Person's relationship to you  | Zip Code                                     |                                  |                                |                    |   |             |                        |
| 19. | (The           | nin 10 years before you filed for use are often called asset-protection   |  | ransfer any prop                 | perty to a self-settled tru    | ıst or similar de  | evice of which yo                       | u are a k   | oeneficiary?           |
|     | Ц              | Yes. Fill in the details.   |  | Description an                   | d value of the property        | transferred        |   |             | Date transfer          |
|     |                |   |  | •                                | , , , ,                        |                    |   |             | was made               |
|     |                | Name of trust   |  |                                  |                                |                    |   |             |                        |
|     |                |   |  |                                  |                                |                    |   |             |                        |

JessicaCase 16-14817

|         | . not riamo              | madio namo       | Jocument        | Page 47     | 01 70               |  |
|---------|--------------------------|------------------|-----------------|-------------|---------------------|--|
| Part 8: | List Certain Financial A | ccounts, Instrun | nents, Safe Dep | osit Boxes, | , and Storage Units |  |

| 20. | or tr<br>Inclu<br>coop | ansferred?<br>de checking, saving<br>peratives, association | gs, money mar   | ket, or other financ | cial accounts |                           |             | eld in your name, or for you |   |   |
|-----|------------------------|---|-----------------|----------------------|---------------|---------------------------|-------------|------------------------------|---|---|
|     |                        | No<br>Yes. Fill in the deta                                 | nile            |                      |               |                           |             |                              |   |   |
|     | _                      | res. Fill ill tile dete                                     | 3115.           |                      | Last 4        | 4 digits of account<br>er |             | e of account or<br>trument   | Date account<br>was closed,<br>sold, moved,<br>or transferred | Last balance<br>before closing<br>or transfer |
|     |                        | Person Who Was  | Paid            |                      | — xxxx        | -                         |             | Checking<br>Savings          |   |   |
|     |                        | Number Street   |                 |                      |               |                           |             | Money market Brokerage Other |   |   |
|     |                        | City  | State           | Zip Code             |               |                           |             |                              |   |   |
|     |                        | Person Who Was  | Paid            |                      | xxxx          | <del>.</del>              | R           | Checking<br>Savings          |   |   |
|     |                        | Number Street   |                 |                      | _             |                           |             | Money market Brokerage       |   |   |
|     |                        |   |                 |                      |               |                           | Ш           | Other                        |   |   |
|     |                        | City  | State           | Zip Code             |               |                           |             |                              |   |   |
|     |                        | <b>ables?</b><br>No<br>Yes. Fill in the deta                | ails.           |                      | Who else      | had access to it?         |             | Describe the contents        | 3   | Do you still have it?                         |
|     |                        | Name of Financia  | l Institution   |                      | Name          |                           |             |                              |   | ☐ No  |
|     |                        | Number Street   |                 |                      | Number        | Street                    |             | _                            |   | Yes   |
|     |                        |   |                 |                      | City          | State                     | Zip Code    |                              |   |   |
|     |                        | City  | State           | Zip Code             | City          | State                     | Zip Code    |                              |   |   |
| 22. | Have                   | e you stored prop   | erty in a stora | ge unit or place     | other than    | your home within          | 1 year befo | ore you filed for bankruptcy | ?   |   |
|     |                        | No Yes. Fill in the deta                                    | •               |                      |               |                           | ·           | , , ,                        |   |   |
|     | _                      |   |                 |                      | Who else      | had access to it?         |             | Describe the contents        | i   | Do you still have it?                         |
|     |                        | Public Storage  |                 |                      |               |                           |             | Mattress, Kitchen Ware       | , Bedroom   | □ No  |
|     |                        | Name of Storage<br>P.O. Box 25050                           | Facility        |                      | Name          |                           |             | Furniture                    |   | ☐ No ✓ Yes                                    |
|     |                        | Number Street   |                 |                      | Number        | Street                    |             |                              |   | 100   |
|     |                        |   |                 |                      | City          | State                     | Zip Code    |                              |   |   |
|     |                        | Glendale  | California      | 91221                | ,             |                           | , 2230      |                              |   |   |
|     |                        | City  | State           | Zip Code             |               |                           |             |                              |   |   |

| Deb         | otor 1 | Jessic Case 16-14817 Doc 1 First Name Middle Name  | Filed 04kg         | 39/16 <u>Er</u><br>₹n¶t <sup>me</sup> Paç | ntered 04/3<br>ge 48 of 70 | 60/16/00:05:10 Desc Mai                   | <u>1</u>        |
|-------------|--------|--|--------------------|---|----------------------------|---|-----------------|
| Par         | 9:     | Identify Property You Hold or Contro   | I for Someo        | ne Else                                   |                            |   |                 |
| 23.         | Do y   | you hold or control any property that someone No Yes. Fill in the details.   | e else owns? Ir    | nclude any pro                            | perty you borro            | wed from, are storing for, or hold in tru | st for someone. |
|             | Ц      | res. I ill ill tile details.   | Where is the       | e property?                               |                            | Describe the contents                     | Value           |
|             |        | Owner's Name   | Number Stre        | eet                                       |                            | -   |                 |
|             |        | Number Street  | _                  |   |                            | -   |                 |
|             |        |  |                    | Otata                                     | 7: 0: 1:                   | -   |                 |
|             |        | 0'1 7'2 0 1  | City<br>—          | State                                     | Zip Code                   |   |                 |
|             |        | City State Zip Code  |                    |   |                            |   |                 |
|             |        | Give Details About Environmental In  | nformation         |   |                            |   |                 |
| For         | ·      | urpose of Part 10, the following definitions apply:  |                    |   |                            |   |                 |
|             | ha     | nvironmental law means any federal, state, or loca<br>azardous or toxic substances, wastes, or material in<br>cluding statutes or regulations controlling the clea | nto the air, land, | soil, surface wa                          | ater, groundwater          |   |                 |
|             |        | ite means any location, facility, or property as define used to own, operate, or utilize it, including dispo   | •                  | vironmental law,                          | whether you now            | own, operate, or utilize it               |                 |
|             |        | azardous material means anything an environment xic substance, hazardous material, pollutant, conta  |                    |   | raste, hazardous s         | substance,                                |                 |
| Re          |        | I notices, releases, and proceedings that you know   | •                  |   | occurred.                  |   |                 |
|             |        |  |                    |   |                            | datatan at an andraman at Hand            |                 |
| <b>24</b> . | Has    | any governmental unit notified you that you r  | тау ве навіе о     | r potentially lia                         | able under or in           | violation of an environmental law?        |                 |
|             |        | Yes. Fill in the details.  |                    |   |                            |   |                 |
|             |        |  | Governmen          | ital unit                                 |                            | Environmental law, if you know it         | Date of notice  |
|             |        | Name of site   | Governmenta        | al unit                                   |                            | -   |                 |
|             |        | Number Street  | Number Stre        | eet                                       |                            | -   |                 |
|             |        |  | City               | State                                     | Zip Code                   | -   |                 |
|             |        | City State Zip Code  | _                  |   |                            |   |                 |
| 25.         | Hav    | e you notified any governmental unit of any re   | elease of hazar    | dous material                             | 7                          |   | _               |
|             |        | No   |                    |   | •                          |   |                 |
|             | ä      | Yes. Fill in the details.  |                    |   |                            |   |                 |
|             |        |  | Governmen          | ital unit                                 |                            | Environmental law, if you know it         | Date of notice  |
|             |        | Name of site   | Governmenta        | al unit                                   |                            | -   |                 |
|             |        | Number Street  | Number Stre        | eet                                       |                            | -   |                 |
|             |        |  | City               | State                                     | Zip Code                   | -   |                 |
|             |        | City State Zip Code  | <u> </u>           |   |                            |   |                 |
|             |        |  |                    |   |                            |   |                 |

| Debto  | or 1     | JessicaCase 16-148 First Name                                 | 17 Doc 1  <br>Middle Name | Filed 04k30/16<br>Document  | Entered 04/30<br>Page 49 of 70 | M16 00:05:10 Desc                               | Main               |
|--------|----------|---|---------------------------|-----------------------------|--------------------------------|---|--------------------|
| 26.    | Hav      | e you been a party in any j                                   | udicial or administra     | tive proceeding under       | any environmental law          | ? Include settlements and orde                  | rs.                |
| ļ      | <b>✓</b> | No  |                           |                             |                                |   |                    |
|        | Ш        | Yes. Fill in the details.                                     |                           | Court or agency             |                                | Nature of the case                              | Status of the      |
|        |          | Case title  |                           |                             |                                |   | case               |
|        |          |   |                           | Court Name                  |                                |   | Pending            |
|        |          |   |                           | Number Street               | _                              |   | On appeal          |
|        |          | Case number   |                           | - Street                    |                                |   | Concluded          |
|        |          | •   |                           | City Stat                   | e Zip Code                     |   |                    |
| Part 1 | 11:      | Give Details About You  | our Business or           | Connections to A            | ny Business                    |   |                    |
| 27.    | With     | nin 4 years before you filed                                  | for bankruptcy, did       | you own a business o        | have any of the follow         | ing connections to any busines                  | ss?                |
|        |          |   |                           |                             | ity, either full-time or part  | time  |                    |
|        |          | A member of a limited li  A partner in a partnersh            |                           | or limited liability partne | rsnip (LLP)                    |   |                    |
|        |          | An officer, director, or m                                    |                           |                             |                                |   |                    |
|        |          | _   |                           | securities of a corporati   | on                             |   |                    |
|        |          | No. None of the above applie<br>Yes. Check all that apply abo |                           | s below for each busines    | S.                             |   |                    |
|        |          |   |                           | Describe the na             | ature of the business          | Employer Identification                         |                    |
|        |          |   |                           |                             |                                | EIN:  | y number of Tries. |
|        |          | Business Name   |                           |                             |                                |   |                    |
|        |          | Number Street   |                           | Name of accou               | ntant or bookkeeper            | Dates business existe                           | d                  |
|        |          | City State  | Zip Code                  |                             | -                              | FromTo  |                    |
|        |          |   |                           |                             |                                |   |                    |
|        |          |   |                           | Describe the na             | ature of the business          | Employer Identification                         | on number Do not   |
|        |          |   |                           |                             |                                | include Social Securit                          |                    |
|        |          | Business Name   |                           |                             |                                | EIN:  |                    |
|        |          | Number Street   |                           |                             |                                | Dates business existe                           | d                  |
|        |          | City  | 7:- 01-                   | Name of accou               | ntant or bookkeeper            | From To   |                    |
|        |          | City State  | Zip Code                  |                             |                                | 11011110  |                    |
|        |          |   |                           |                             |                                |   |                    |
|        |          |   |                           | Describe the na             | ature of the business          | Employer Identification include Social Security |                    |
|        |          | Business Name   |                           |                             |                                | EIN:  |                    |
|        |          |   |                           |                             |                                | Detec husings and state                         | al .               |
|        |          | Number Street   |                           | Name of accou               | ntant or bookkeeper            | Dates business existe                           | u                  |
|        |          | City State  | Zip Code                  |                             |                                | From To   |                    |
|        |          |   |                           |                             |                                |   |                    |
|        |          |   |                           |                             |                                |   |                    |

| Debto  | or 1   | JessicaCase                         | 16-14817                                |                      | ed 04k39/16             |                            | <u>red</u>   | Desc Main                         |
|--------|--------|-------------------------------------|---|----------------------|-------------------------|----------------------------|--|-----------------------------------|
|        |        | First Name                          |   | Middle Name D        | ocumetnit <sup>me</sup> | Page !                     | 50 of 70   |                                   |
|        |        | nin 2 years befo<br>itors, or other | •                                       | oankruptcy, did you  | give a financial st     | tatement to                | o anyone about your business? Ind  | clude all financial institutions, |
|        |        | No<br>Yes. Fill in the d            | otoilo bolovy                           |                      |                         |                            |  |                                   |
|        | ш      | tes. Fill III trie u                | etalis delow.                           |                      | Date issued             |                            |  |                                   |
|        |        |                                     |   |                      | 2000 100000             |                            |  |                                   |
|        |        | Name                                |   |                      | MM/DD/YYYY              |                            |  |                                   |
|        |        | Number Stre                         | eet                                     |                      | _                       |                            |  |                                   |
|        |        | City                                | State                                   | Zip Code             | <u> </u>                |                            |  |                                   |
|        |        | ĺ                                   |   | Zip Gode             |                         |                            |  |                                   |
| Part ' | 12:    | Sign Below                          | 1                                       |                      |                         |                            |  |                                   |
| а      | nd c   | orrect. I under                     | stand that makin<br>n result in fines u | g a false statement  | , concealing prope      | erty, or obt<br>to 20 year | and I declare under penalty of per<br>aining money or property by fraud<br>s, or both. 18 U.S.C. §§ 152, 1341, 1 | l in connection with a            |
|        |        | Sic                                 | /s/ Jessica King<br>nature of Debtor    | 1                    |                         |                            | Signature of Debtor 2  |                                   |
|        |        | Da                                  | te 4/30/2016                            |                      |                         |                            | Date   |                                   |
| D      | oid yo | ou attach addit                     | ional pages to Y                        | our Statement of Fi  | inancial Affairs for    | r Individua                | lls Filing for Bankruptcy (Official F  | Form 107)?                        |
| Ŀ      | ZN     | lo                                  |   |                      |                         |                            |  |                                   |
|        | _ Y    | ′es                                 |   |                      |                         |                            |  |                                   |
| D      | oid yo | ou pay or agree                     | e to pay someon                         | e who is not an atto | rney to help you fi     | ill out bank               | cruptcy forms?   |                                   |
| Ŀ      | Z N    | lo                                  |   |                      |                         |                            |  |                                   |
|        | Y      | es. Name of per                     | son                                     |                      |                         |                            | Attach the Bankruptcy Petition<br>Declaration, and Signature (Of   | •                                 |
|        |        |                                     |   |                      |                         |                            |  |                                   |

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In

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### **UNITED STATES BANKRUPTCY COURT**

### **Northern District of Illinois**

| re | Jessica King  | Case No.                                       |                                     |
|----|---|--|-------------------------------------|
| _  | Debtor  | <del>_</del>                                   | (If known)                          |
|    |   | Chapter _                                      | Chapter 13                          |
|    | DISCLOSURE OF COMPE   | NSATION OF ATTORNEY                            | FOR DEBTOR                          |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before trendered or to be rendered on behalf of the debto | ne filing of the petition in bankruptcy, or ag | reed to be paid to me, for services |
|    | For legal services, I have agreed to accept   |  | \$4,000.00                          |
|    | Prior to the filing of this statement I have receive  | d  | \$350.00                            |
|    | Balance Due   |  | \$3,650.00                          |
| 2. | The source of the compensation paid to me was:  |  |                                     |
|    | <b>✓</b> Debtor □ O   | ther (specify)                                 |                                     |
| 3. | The source of the compensation paid to me is:   |  |                                     |
|    | <b>✓</b> Debtor □ O   | ther (specify)                                 |                                     |
| 4. | I have not agreed to share the above-disclose members and associates of my law firm.  | ed compensation with any other person unle     | ess they are                        |
|    | I have agreed to share the above-disclosed commembers or associates of my law firm. A copthe people sharing in the compensation, is attached        | y of the agreement, together with a list of    |                                     |
| 5. | In return for the above-disclosed fee, I have agree a. Analysis of the debtor's financial situation, bankruptcy;                                    |  |                                     |
|    | b. Preparation and filing of any petition, sche   | dules, statements of affairs and plan which    | n may be required;                  |
|    | c. Representation of the debtor at the meeting  | g of creditors and confirmation hearing, and   | d any adjourned hearings thereof;   |

d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;

|   | CERTIFICATION  |  |
|---|--|--|
| I certify that the foregoing is a complete the debtor(s) in this bankruptcy proceedings | e statement of any agreement or arrangement for payment to me for representation of s. |  |
| 4/30/2016   | /c/ Angie Harb   |  |

Signature of Attorney

Semrad Law Firm

Name of law firm

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Date

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate



tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 350.00 toward the flat fee, leaving a balance due of \$ 3650.00 ; and \$ 72.00 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:

Signed:

Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### Chapter 7: Liquidation

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$310 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$235 | filing fee         |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

# Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# Case 16-14817 Doc 1 Filed 04/30/16 Entered 04/30/16 00:05:10 Desc Main UNITED STATES BANKBURG OF POURT Northern District of Illinois

| In re: | King, Jessica                            | Case No   |       |
|--------|--|---|-------|
| _      | Debtor(s)                                |   |       |
|        |  | Chapter. Chapter13  |       |
|        | VERIFIC                                  | ATION OF CREDITOR MATRIX  |       |
|        | The above named Debtors hereby verify th | at the attached list of creditors is true and correct to the best of their knowle | ∍dge. |
|        |  |   |       |
| Date:  | 4/30/2016                                | /s/ King, Jessica   |       |
|        |  | King, Jessica   | _     |

Signature of Debtor

# Case 16-14817 Doc 1 Filed 04/30/16 Entered 04/30/16 00:05:10 Desc Main Document Page 64 of 70

Santander Consumer USA PO Box 961245 Fort Worth , TX 76161 USA

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA , GA 30301 USA

CONSERVE 200 CROSS KEYS OFFICE PA FAIRPORT , NY 14450 USA

Saint Xavier University 3700 W. 103rd St. Chicago , IL 60655 USA

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA , GA 30301 USA

AES/NCFC/FHLB P.O. Box 61047 Harrisburg , PA 17106 USA

AES/NCFC/FHLB P.O. Box 61047 Harrisburg , PA 17106 USA

CAPITAL ONE BANK USA N PO BOX 85520 RICHMOND , VA 23285 USA

Capital One Po Box 30281 Salt Lake Cty , UT 84130 USA

CHASE CARD PO BOX 15298 WILMINGTON , DE 19850 USA

AES/ESA PO BOX 61047 HARRISBURG , PA 17106 USA

Village of Maywood 40 Madison Street Maywood , IL 60153 USA Case 16-14817 Doc 1 Filed 04/30/16 Entered 04/30/16 00:05:10 Desc Main Document Page 65 of 70

IL Secretary of State 2701 S. Dirksen Parkway Springfield , IL 62723 USA

Triton College 2000 5th Ave River Grove , IL 60171 USA

| Debtor 1 Jessica ase 16-  | 14817 Doc 1 Filed 04/30   | 16 Entered 04/30/1000   | 9:05:10 Desc Main   |
|---|---|---|---|
|   | Document<br>Document<br>Document<br>Document<br>Document<br>Document  | Page 66 of 70   |   |
| 16. What kind of debts<br>do you have?  | as "incurred by an individual  No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily bu   | primarily for a personal, family, usiness debts? Business debts or investment or through the ope  | are debts that you incurred to eration of the business or   |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be available to  No.  Yes.   |   | is excluded and administrative expenses are   |
| 18. How many creditors do you estimate that you owe?  | ☑ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000  | 25,001-50,000<br>50,001-100,000<br>More than 100,000  |
| 19. How much do you estimate your assets to be worth?   |   | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below  | There are in the control of   |   |   |
| For you   | and correct.  If I have chosen to file under Chapt or 13 of title 11, United States Code proceed under Chapter 7.  If no attorney represents me and I of fill out this document, I have obtained I request relief in accordance with the I understand making a false statement. | ter 7, I am aware that I may proced. I understand the relief available did not pay or agree to pay some ed and read the notice required be chapter of title 11, United Statent, concealing property, or obtain can result in fines up to \$250,000 19, and 35/71. | es Code, specified in this petition.  |
| GEN OORSEE EERST ONGEN AS SIE WAS DE STONE AS SIE ONGEN AS  | Executed on 4/11/2016<br>MM / DD / YYY  | Execute   |   |

|                              | -C 16 1401  | 7 Doo 1 Filad 0.4             | /20/16 Enters                            | d 04/30/16 00:05:10  | Dogo Main  |
|------------------------------|---|-------------------------------|--|--|--|
| Fill in this inform          | nation to identify your cas                       | e:                            |  | 417/730/16 00.05.10  | Desc Main  |
| Debtor 1                     | Jessica   |                               | King                                     |  |  |
| Debtor 2                     | First Name  | Middle Name                   | Last Name                                |  |  |
| (Spouse, if filing           | First Name  | Middle Name                   | Last Name                                |  |  |
| United States B              | ankruptcy Court for the:                          | Northern                      | District of Illinois                     |  |  |
| Case number (If known)       |   |                               | (State)                                  |  | ·  |
| Official F                   | orm 106De   | <u>C</u> .                    |  |  | Check if this is an amended filing   |
| <u>Declarat</u>              | ion About a                                       | n Individual De               | btor's Sched                             | dules  | 12/15  |
| f two married p              | eople are filing togethe                          | r, both are equally responsit | ole for supplying correc                 | ct information.  |  |
| Did you pa                   | Below<br>y or agree to pay some                   | one who is NOT an attorney    | to help you fill out bank                | ruptcy forms?  |  |
| ✓ No<br>☐ Yes. N             | ame of person                                     |                               | Attach Bankruptc)<br>Signature (Official | y Petition Preparer's Notice, Declar<br>I Form 119).   | ation, and   |
|                              |   |                               |  |  | 4 1  |
| Under pena<br>that they ar   | alty of perjury, I declare<br>te true and correct | that I have read the summar   | y and schedules filed w                  | vith this declaration and  |  |
| 🗶 /s/ Jessica                | King X  |                               | ×  |  | A :  |
| Signature of                 | Debtor 1  |                               | ***************************************  | re of Debtor 2   | \$ 6   |
| Date <u>4/11/2</u> (<br>MM/D | DDYYYY  |                               | Date _                                   | MM/DD/YYYY   |  |
|                              |   |                               |  | THE STATE OF THE S | MAN THE TAXABLE IN CONTRACT STREET THE STREET CONTRACT CO |

| Debtor 1      | Jessiga ase 16  | 6-14817                 | Doc 1          | Filed 04/30/16          | Entered 04/30/16-00:05:10   | Desc Main                           |
|---------------|---|-------------------------|----------------|-------------------------|---|-------------------------------------|
|               |   |                         | WINDER Hairie  |                         | Page 68 of 70   |                                     |
| 28. Wi<br>cre | thin 2 years before<br>editors, or other pa           | you filed for<br>rties. | bankruptcy, o  | did you give a financia | Il statement to anyone about your business?   | Include all financial institutions, |
|               | No<br>Yes. Fill in the deta                           | aile holour             |                |                         |   |                                     |
| لسا           | 100. Thrut the dete                                   | ins delow.              |                | Date issued             | i .   |                                     |
|               | Name  |                         |                | MM/DD/YYY               | <u> </u>  |                                     |
|               | Number Street   |                         |                |                         |   |                                     |
|               | City  | State                   | Zip Co         | nde                     |   |                                     |
| Part 12:      | Sign Below  |                         | E.p 00         | do                      |   |                                     |
| l hav         | e read the answers                                    | no mat makin            | g a raise stat | tement, concealing pr   | attachments, and I declare under penalty of poperty, or obtaining money or property by fra<br>up to 20 years, or both. 18 U.S.C. §§ 152, 1341 | ud in connection with a             |
|               |   | Jessica King            | AK             | RIOY                    | *   |                                     |
|               | Signat  | ure of Debtor 1         |                |                         | Signature of Debtor 2   |                                     |
|               |   | /                       | <b>^</b> \     | 1                       |   |                                     |
|               | Date  | 4/11/2016               |                |                         | Date  |                                     |
| Did y         |   | (                       | our Statemen   | nt of Financial Affairs | Date  | Form 107\2                          |
| governg       |   | (                       | our Statemen   | nt of Financial Affairs |   | Form 107)?                          |
| <b>☑</b> ▷    | ou attach addition                                    | (                       | our Statemen   | nt of Financial Affairs | Date  | Form 107)?                          |
|               | ou attach addition<br>No<br>'es                       | al pages to Ye          |                |                         | Date  | Form 107)?                          |
| Did ye        | ou attach addition<br>No<br>'es                       | al pages to Ye          |                |                         | Date<br>for Individuals Filing for Bankruptcy (Official   | Form 107)?                          |
|               | ou attach addition<br>No<br>∕es<br>ou pay or agree to | al pages to Ye          |                |                         | Date<br>for Individuals Filing for Bankruptcy (Official   | n Preparer's Notice,                |

# Case 16-14817 Doc 1 Filed 04/30/16 Entered 04/30/16 00:05:10 Desc Main Northern District of Illinois

| In re: _ | King, Jessica  Debtor(s)                   | Case No   |  |  |  |
|----------|--|---|--|--|--|
|          |  | Chapter. Chapter13  |  |  |  |
|          | VERIFICATION OF CREDITOR MATRIX            |   |  |  |  |
|          | The above named Debtors hereby verify that | the attached list of creditors is true and correct to the best of their knowledge |  |  |  |
| Date:    | 4/11/2016                                  | /s/ King, Jessica King, Jessica Signature of Debtor                               |  |  |  |

| To lind a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  17. How do the lines compare?  17a.  Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable income (Official Form 122C-2).  17b.  Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.  2art 3:  Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)  18.  Copy your total average monthly income from line 11.  2art 3:  Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)  19.  Deduct the marital adjustment if it applies. If you are maried, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  20b. Subtract line 19a from line 18.  20c. Calculate your current monthly income for the year. Follow these steps:  20a. Copy line 19b.  Multiply by 12 (the number of months in a year).  21 Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.   | Del               | otor 1  | Jessica Se 16-14817 Doc 1 Filed 04/3   |   |   |  |  |  |
|--|-------------------|---|--|---|---|--|--|--|
| 16a. Fill in the state in which you live.  16b. Fill in the number of people in your household.  16c. Fill in the median family income for your state and size of household In find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clark's office.  17c. How do the lines compane?  17a. If Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).  17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.  20d. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the markla adjustment if it applies, if you are married, your spouse's income, copy the amount from line 13.  19b. Subtract line 19a from line 18.  20c. Calculate your current monthly income for the year, Follow these sleps:  20a. Copy fine 19b.  Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  339.366.04  11. How do the lines compane?  21. Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 3 years. Go to Part 4.  21. Line 20b is lose than in equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.   | 16.               | Cal   | culate the median family income that applies to you. Follow  | ent Page /U of /U vithese stens:  | . Normal transfer to the state of the state |  |  |  |
| 16c. Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  17. How do the lines compare?  18. If his in the income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable income (Official Form 122C-2).  18. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.  24. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)  18. Copy your total average monthly income from line 11.  19. Deduct the marital adjustment if it applies. If you are maried, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  20b. Subtract line 19a from line 18.  20c. Copy line 19b.  Multiply by 12 (the number of months in a year).  21c. Copy use median family income for the year. Follow these steps:  22c. Copy the median family income for your state and size of household from line 16c.  32d. How do the lines compare?  22c. Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 3 years. Go to Part 4.  23d. Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  23d. Jessica King  24d. Jessica King  25d. Jessi |                   |   | Fill in the state in which you live  |   |   |  |  |  |
| To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  17. How do the lines compare?  17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § \$1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable income (Official Form 122C-2). The commitment period under 11 U.S.C. § \$1325(b)(3). Go to Part 3 and fill out Calculation of Disposable income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.  2art 3: Calculate Your Commitment Period Under 11 U.S.C. § \$1325(b)(4)  18. Copy your total average monthly income from line 11.  19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  19b. Subtract line 19a from line 18.  20c. Copy line 19b.  Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  239.326.04  20c. Copy the median family income for your state and size of household from line 16c.  489.741.00  489.741.00  599.741.00  10 Fill of this form, check box 3, The commitment period is 3 years. Go to Part 4.  210 Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 3 years. Go to Part 4.  211 Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  |                   | 16b.  | Fill in the number of people in your household.  | <del></del>   |   |  |  |  |
| 17. How do the lines compare?  17a.  Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). The line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable Income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.  2art 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)  2art 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)  2art 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)  2b Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  2b. Subtract line 19a from line 18.  2c. Calculate your current monthly income for the year. Follow these steps:  2c. Capy line 19b.  Multiply by 12 (the number of months in a year).  2c. Capy line 19b.  Multiply by 12 (the number of months in a year).  2c. Copy the median family income for your state and size of household from line 16c.  499.741.00  33.277.17  x 12  2b. The result is your current monthly income for the year for this part of the form.  2d Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  2 Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  3 Sign Below  By signing here, I declare finder penalty of perjury that the information on this |                   | 16c.  | To find a list of applicable median income amounts, go online  | sehold using the link specified in the separate instructions for this form. This list may   | \$49,741.00   |  |  |  |
| 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.  2art 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)  18. Copy your total average monthly income from line 11.  9. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  19b. Subtract line 19a from line 18.  20c. Calculate your current monthly income for the year. Follow these steps:  20a. Copy line 19b.  Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  339,326,04  10c. Copy the median family income for your state and size of household from line 16c.  349,741,00  11. How do the lines compare?  21. Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  22. Sign Below  By signing here, I declare finder pegalty of perjury that the information on this statement and in any attachments is true and correct.   | 17.               | How   |  |   |   |  |  |  |
| Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)  8. Copy your total average monthly income from line 11.  9. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  19b. Subtract line 19a from line 18.  20c. Calculate your current monthly income for the year. Follow these steps:  20a. Copy line 19b.  Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  11. How do the lines compare?  12 Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  12 Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  21 Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  23 Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.   |                   | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). |  |   |   |  |  |  |
| 18. Copy your total average monthly income from line 11.  19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  19b. Subtract line 19a from line 18.  20c. Calculate your current monthly income for the year. Follow these steps:  20a. Copy line 19b.  Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  11. How do the lines compare?  I Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.   |                   | 17b.  | recognition of Dis   | form, check box 2, Disposable income is determined under 11 U.S.C. § sposable Income (Official Form 122C-2). On line 39 of that form, copy your |   |  |  |  |
| 18. Copy your total average monthly income from line 11.  19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  19b. Subtract line 19a from line 18.  20c. Calculate your current monthly income for the year. Follow these steps:  20a. Copy line 19b.  Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  11. How do the lines compare?  I Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.   | art               | 3: C  | Calculate Your Commitment Period Under 11 U.S  | S.C. §1325(b)(4)  |   |  |  |  |
| 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.  19a. If the marital adjustment does not apply, fill in 0 on line 19a.  \$3.277.17  19b. Subtract line 19a from line 18.  \$3.277.17  20c. Copy line 19b.  Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  11. How do the lines compare?  I Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.   | 18.               | Copy  | your total average monthly income from line 11.  |   | P2 077 47   |  |  |  |
| 19a. If the marital adjustment does not apply, fill in 0 on line 19a.  \$3.277.17  19b. Subtract line 19a from line 18.  \$3.277.17  20a. Copy line 19b.  Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  11. How do the lines compare?  ✓ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  ☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  ** Isl Jessica King*  **Sign Below*   | 19.               | Dedu<br>comn  | uct the marital adjustment if it applies. If you are married, yo<br>nitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct | our spouse is not filing with you, and you contend that calculating the<br>t part of your spouse's income, copy the amount from line 13.        | \$3,277.17  |  |  |  |
| 20. Calculate your current monthly income for the year. Follow these steps:  20a. Copy line 19b.  Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  41. How do the lines compare?  Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  |                   | 19a.  | If the marital adjustment does not apply, fill in 0 on line 19a.   |   | -\$0.00   |  |  |  |
| 20a. Copy line 19b. Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  21. How do the lines compare?  22 Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  23 Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  24 Sign Below  25 Isl Jessica King  |                   |   |  | 1   | \$3,277.17  |  |  |  |
| Multiply by 12 (the number of months in a year).  20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  349,741.00  4.1. How do the lines compare?  Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.   |                   |   |  | e steps:  |   |  |  |  |
| 20b. The result is your current monthly income for the year for this part of the form.  \$39,326.04  20c. Copy the median family income for your state and size of household from line 16c.  \$49,741.00  1. How do the lines compare?  Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.   |                   | 20a. Copy line 19b.   |  |   |   |  |  |  |
| 20b. The result is your current monthly income for the year for this part of the form.  20c. Copy the median family income for your state and size of household from line 16c.  349,741.00  21. How do the lines compare?  Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.  Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  |                   |   | Multiply by 12 (the number of months in a year).   |   |   |  |  |  |
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| Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.  Sign Below  By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  ** Is/ Jessica King  Signeture of Data.  | 1.                | How   | do the lines compare?  | _   |   |  |  |  |
| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  ** Is/ Jessica King **  Signeture of Data**  |                   | Li<br>pe  | ne 20b is less than line 20c. Unless otherwise ordered by the cou<br>eriod is 3 years. Go to Part 4.                                 | urt, on the top of page 1 of this form, check box 3, The commitment   |   |  |  |  |
| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.  ** Is/ Jessica King  Signature of Dubbase of Dubbas |                   | Li<br>co  | ne 20b is more than or equal to line 20c. Unless otherwise ordere<br>Immitment period is 5 years. Go to Part 4,                      | red by the court, on the top of page 1 of this form, check box 4, The   |   |  |  |  |
| /s/ Jessica King   | art 4: Sign Below |   |  |   |   |  |  |  |
| Signature of Dulas   |                   | В   | y signing here, I declare under penalty of perjury that the informa  | ation on this statement and in any attachments is true and correct.   |   |  |  |  |
|  |                   | 3   |  |   |   |  |  |  |
| Date   |                   |   | /  | Date  |   |  |  |  |
| WIM/DD/YYYY  |                   |   |  | MM/DD/YYYY  | •   |  |  |  |
| If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.  |                   |   |  |   |   |  |  |  |